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SSI OUTREACH: IS THE FEDERAL GOVERNMENT DOING ENOUGH?

JOINT HEARING

BEFORE THE

SUBCOMMITTEE ON HUMAN SERVICES

OF THE

SELECT COMMITTEE ON AGING
HOUSE OF REPRESENTATIVES

AND THE

NEW YORK STATE ASSEMBLY
STANDING COMMITTEE ON AGING

ONE HUNDRED FIRST CONGRESS

FIRST SESSION

OCTOBER 2, 1989, CENTRAL ISLIP, NY

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SSI OUTREACH: IS THE FEDERAL GOVERNMENT DOING ENOUGH?

MONDAY, OCTOBER 2, 1989

U.S. HOUSE OF REPRESENTATIVES, SELECT COMMITTEE ON AGING, SUBCOMMITTEE ON HUMAN SERVICES, AND THE NEW YORK STATE ASSEMBLY, STANDING COMMITTEE ON AGING,

Central Islip, NY.

The subcommittee and standing committee met, pursuant to notice, at 10:30 a.m, Central Islip, NY, Hon. Thomas J. Downey (chairman of the Subcommittee on Human Services), and Hon. Paul Harenberg (chairman of the Standing Committee on Aging) presiding.

Members present: Representatives Downey, Slaughter, and Blaz.

Also present: Assemblyman Harenberg.

Staff present: John P. Olinger, Majority Staff Director; Moya D. Benoit, Majority Research Assistant; Natalie Cannon, Minority Staff Director; Joseph Sweeney, Legislative Aide to Assemblyman Paul Harenberg; and Basil Anastassiou, Program Analyst to New York State Aging Committee.

OPENING STATEMENT OF CHAIRMAN THOMAS J. DOWNEY

Mr. DOWNEY. First of all, let me convene the subcommittee and apologize to my constituents that are here to testify, the Supervisor and the county executive and to my colleague, Louise Slaughter, who is from Rochester via Washington.

I am delighted to have with me my friend and colleague Paul Harenberg who is the Chairman of the Aging Committee in the New York State Assembly. Paul has actually been urging me to do this for more than 2 years and we have a happy marriage on Long Island of having Paul in the position that he is in the State Assembly, and I as the chairman of the subcommittee that has jurisdiction over SSI so we are marrying our mutual interests. Congresswoman Slaughter is a member of the Aging Committee and a vigorous and active voice for the aging in upstate New York, and we are delighted to have Louise with us.

Today's hearing does focus on Supplemental Security Income outreach programs and whether the Federal Government is doing enough to ensure that all eligible people are enrolled in the program. Now, the Federal Government's commitment to an aggressive and effective SSI outreach program is critically important to us here in Suffolk County. If the Federal Government fails to do

the job, then the burden falls on the State and the local government, and ultimately, on the local property taxpayers.

We are eager to relieve the property tax burden here in Suffolk County and I believe that it is the Federal Government's responsibility to provide income security to the poor, the aged and the disabled. Property taxes should not have to be used to fund programs that are more properly paid for with Federal revenues.

For the past 8 years, the Federal Government has dumped a growing part of its responsibility on the State and local government doorsteps. Ultimately, the property taxpayers have borne the burden. The Reagan revolution had a price, and Suffolk County taxpayers have had to pay for it.

I believe that if we ensure the Federal Government bears its fair share, we can relieve the strain on local government revenues.

Suffolk County estimates that it will save millions of dollars by placing people who are now on county home relief in the SSI program where they belong and I will work with our county executive to make sure that these savings are achieved.

An aggressive outreach program must be an integral part of our effort to help poor people. Too many people do not know that they are eligible and there are just too many roadblocks that prevent them from finding out. Once they do find out, they often have difficulty successfully negotiating the application process.

The 1983 Social Security Amendments mandated the Social Security Administration to conduct two separate outreach activities aimed at the aging population. There was a first time mailing alert to those aged individuals and couples with Social Security benefits were less than supplemental security income eligible. Between February and July of 1984, over 7.6 million notices were mailed as part of this one-time alert, and SSA used a mail survey questionnaire to evaluate the effects of this alert process and, as a result of this one time outreach effort, there were approximately 160,000 field office contacts and these contacts resulted in 79,000 applications for SSI payments, and 58,000 awards with the average monthly benefit of $60 going to the Social Security beneficiaries.

The second outreach activity was also to notify these people and it also had a very salutary result. Now, as the chairman of the Ways and Means Committee, Subcommittee on Human Resources, I believe more has got to be done to reach out to the poor elderly who are eligible for SSI. And, for the last 15 years, I have worked actively to ensure that these people receive their benefits, and I am very proud to announce that in the reconciliation bill which is currently before the Congress, we have provided additional funds to increase for SSI outreach and, in fact, we will be making sure of a couple of things with SSI. We have increased the payment by $2 to an individual per month, and by $3 to a couple above that which they get for—to which they are otherwise eligible. These are major changes and we have also done a number of things for SSI for children. But, we are here today, principally to hear about what is being done on the county and town level to improve this program to not only make the people who need it eligible, but to relieve the property tax burden and I hope and I look forward to learning more about the local efforts.

Unfortunately, the Social Security Administration does not allow field representatives to come testify, but they have sent us a statement for the record by Ms. Gwendolyn S. King, who is the Commissioner of Social Security. In it Ms. King indicates that the Social Security Administration will be setting up a panel to determine how to improve the SSI outreach program. So we are happy, even though they are not here, they are with us in spirit and they understand that this is an important part of their responsibility as well.

[The prepared statements of Chairman Thomas J. Downey and Commissioner Gwendolyn S. King follow:]

STATEMENT OF THE

HON. THOMAS J. DOWNEY

SSI OUTREACH: IS THE FEDERAL GOVERNMENT DOING ENOUGH?

October 2, 1989

I am delighted to join my friend and colleague Assembly Paul Harenberg, Chairman of New York State's Standing Committee on Aging, in convening today's hearing, and I would like to welcome our distinguished panel of witnesses. Paul has been a courageous and effective advocate of programs for the elderly of this community, and we have worked together on many occasions for the benefit of our senior citizens.

Today's hearing focuses on Supplemental Security Income outreach programs and whether the Federal government is doing enough to ensure that all eligible people are enrolled in the program. The Federal government's commitment to an aggressive and effective SSI outreach program is critically important to us here in Suffolk County. If the Federal government fails to do the job, the burden falls on state and local government--and ultimately, on the local property tax payer.

We are eager to relieve the property tax burden. I believe that it is a Federal responsibility to provide income security to the poor, the aged and the disabled. Property taxes should not have to be used to fund programs that are more properly paid for with Federal revenues.

For the past eight years, the Federal government has dumped a growing part of its responsibility on state and local government doorsteps. Ultimately, the property taxpayers have borne the burden. The Reagan revolution had a price, and Suffolk County taxpayers have had to pay for it.

I believe that if we ensure that the Federal government bears its fair share, we can relieve the strain on local government revenues.

Suffolk County estimates that it will save millions of dollars by placing people who are now on county home relief in the SSI program where they belong. I will work with County officials to see that these savings are achieved.

An aggressive outreach program must be an integral part of our effort to help poor people. Too many people do not know that they are eligible and there are just too many roadblocks that prevent them from finding out. Once they find out, they often have difficulty successfully negotiating the application process.

The 1983 Social Security Amendments mandated the Social Security Administration to conduct two separate outreach activities aimed at the aged population. The first was a one time mailing alert to those aged individuals and couples whose Social Security benefits were less than the supplemental security income eligibility levels. Between February and July 1984, over 7.6 million notices were mailed as part of this one-time alert. SSA used a mail survey questionnaire to evaluate the effects of this alert process. As a result of the one-time outreach effort, there were approximately 160,000 field office contacts. These contacts resulted in 79,000 applications for SSI payments and 58,000 awards with an average monthly SSI payment of $60 to supplement these recipients' social security benefits.

The second outreach activity is a continuing effort to notify two groups of Social Security beneficiaries: those about to reach age 65; and disabled individuals who have been receiving Social Security benefits for 21 consecutive months and will soon be eligible for Medicare. Beginning in June of 1983, and continuing each month, approximately 110,000 aged and disabled social security beneficiaries receive an SSI alert which accompanies the Medicare enrollment notice. The trend in SSI monthly aged awards showed a marked change when this mailing began. SSA estimates that about 2,000 additional aged individuals have resulted from ongoing alerts since July 1983.

As a result of these two outreach efforts, the decline in the aged SSI population was temporarily reversed, resulting in a high of 2,083,633 aged recipients in September of 1984. However, with the exception of the increase that occurred because of the 1984 outreach efforts, the overall SSI participation rate declined from 75 % in 1977 to 58% in 1987.

As the Chairman of the House Ways and Means Committee's Subcommittee on Human Resources, I believe that more must be done to reach out to those poor elderly who are eligible for SSI. For the past fifteen years, I have actively worked to ensure that these people receive the benefits they deserve. But more Federal response to this problem is needed.

I am very proud of legislation I authored that has been included in the FY 1990 Budget Reconciliation Act, which would establish a permanent SSI outreach program for adults, aimed at populations for whom it would be most effective. This program would also require the Secretary of the Department of Health and Human Services to provide Congress with an annual report on the program's effectiveness. Such efforts should include not only ongoing efforts to notify social security beneficiaries of possible eligibility for SSI, but other efforts aimed at those not receiving social security.

In addition, as the Chairman of the House Select Committee on Aging's Subcommittee on Human Services, I feel it is important to note that during the most recent reauthorization of the Older Americans Act Amendments in 1987, a provision was included which authorized a program of outreach services for older persons who may be eligible for, but who are not receiving, benefits under SSI.

This provision authorizes $10 million annually for grants to States to identify older persons in the greatest economic need, to inform them about their potential eligibility for these programs, and to assist them in applying for assistance.

While no money has yet been appropriated for this provision, I will work during the upcoming reauthorization of the Older Americans Act in 1991, to see that funds are made available.

I would like to take a moment again to praise Paul Harenberg and the efforts he has made on the State level to improve the quality of life for the poor elderly in our State and in Suffolk County. Paul's legislation, signed into law this past July, established a Supplemental Security Income Outreach program, in addition to expanding already existing programs for the elderly. This program requires the New York State Office on Aging to fund up to 10 qualifed nonprofit organizations or area agencies on aging for outreach activities designed to increase enrollment in SSI. It is a commendable initiative, and it is an effort that will help many in New York State.

I believe that if we are to enjoy success and increase elderly participation in SSI, we must continue to work together as a team to ensure that everything possible is being done to accomplish this goal. I look forward to continuing to work with Paul, but I realize that ultimately, the Federal government must do its share.

It is important to note at this time that the Social Security Administration's regional office was invited to testify this morning, but they declined, citing an SSA policy stipulating that the agency will not appear at field hearings. It is regrettable that this policy prevents us from hearing directly from SSA, and more importantly, it prevents SSA from hearing the important concerns raised here today. Clearly, the agency needs to become more involved with advocates, policy makers and beneficiaries.

I look forward to hearing the thoughts and concerns of our distinguished witnesses today.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Social Security Administration

Refer to:

Office of the Commissioner
Baltimore MD 21235

STATEMENT FOR THE RECORD

GWENDOLYN S. KING

COMMISSIONER OF SOCIAL SECURITY

HEARING ON SSI OUTREACH

HOUSE SELECT COMMITTEE ON AGING

SUBCOMMITTEE ON HUMAN SERVICES

OCTOBER 2, 1989

Chairman Downey and Assemblyman Harenberg:

Thank you for offering the Social Security Administration (SSA) the opportunity to express our commitment to an active, effective outreach effort for the Supplemental Security Income (SSI) program.

Outreach A Top Priori y

As you know I have been Commissioner for only a short time. During that time, I have observed that SSA's dedicated employees have done a great deal to reach out to those people who could be but are not receiving SSI benefits. However, it is also very clear to me that we can do more, and I assure you that we will.

I firmly believe that SSA has a moral responsibility to identify those who, for any of a variety of reasons, are not receiving SSI benefits for which they are eligible. Economic suffering by people who are not receiving the benefits they are entitled to have is not acceptable, and we will take any and all measures necessary to remedy it.

I have established SSI outreach as a major priority for SSA and established an intercomponent SSI outreach task force, chaired by the Associate Commissioner for Supplemental Security Income. The task force will develop a comprehensive SSI outreach policy based on a three-pronged approach.

First SSA must do a better job of providing information about and promoting understanding of the SSI program. In order for an individual to become eligible for SSI benefits he or she must first be made aware that the program exists and that SSA is here to see that those who are eligible begin receiving benefits.

Second, to reach out to individuals who are aware of the program but are reluctant to apply for "welfare," we will work toward a more positive public perception of the program. There should be no stigma associated with applying for SSI benefits; the program is intended to alleviate the economic hardship that aged and disabled people may suffer, no matter what the cause.

Finally, we will make the process of applying for SSI benefits easier so as to assure that people do not fail to establish eligibility due to some real or perceived obstacle in the application process. Supplying the necessary documentation can be very difficult in any case, and for those who are suffering severe economic hardship can be overwhelming. The SSI program is here to assist those who are truly struggling and it is SSA's responsibility to make applying for the assistance they are entitled to as easy as we can.

SSA Outreach Activities

The outreach task force recommendations will build on the foundation of outreach activities currently being carried out by SSA. Our local Social Security offices provide the foundation of the agency's longstanding, ongoing commitment to outreach. Local offices work with organizations in their service areas to help people learn about their potential eligibility for benefits under programs we administer. I am asking all SSA employees to put forth an extra effort to assist those who should be receiving SSI, and have asked the SSI outreach task force to consider putting outreach into the evaluation of field managers' performance.

Our local offices maintain ongoing working relationships with institutions to help people apply for or restart benefits when they are discharged. These relationships are an important component of our ongoing outreach efforts. A recent initiative to help SSI claimants and former recipients make the transition from institutions to local communities has almost doubled the number of prerelease agreements our local offices have entered into with hospitals, nursing homes, mental institutions, prisons, and other facilities. These agreements allow for an early determination or redetermination of SSI eligibility for people who are institutionalized but are soon to be released to live in the community. Many of these people whose release is imminent do not have enough money to take care of themselves once they are on their own. If they wait until they are released to apply for SSI or to seek to have their benefits restarted, they may be out and be without funds while waiting for their eligibility to be established. In many cases that might result in homelessness.

To enhance the day-to-day outreach efforts carried on in the field, we are continuing our efforts on the national level to improve and expand SSI public information activities. Our efforts are focused in several directions, one of the most important of which is to maintain liaison with national, State, and local legal and welfare agencies and advocacy groups to tell them about the SSI program and enlist their assistance in finding potentially eligible people. After 15 years of experience in administering the SSI program, SSA has learned a great deal from the many national and local initiatives undertaken by SSA and others to inform people about their potential eligibility. We know that it is an effort that must be continually renewed and must involve a wide universe of individuals and groups outside of SSA.

I am very pleased to be able to report that at a recent symposium on the SSI program some 50 service and advocacy organizations joined SSA in discussing what is known mutually about communicating with people who might be eligible for SSI and

how best to help them in the application process. The task force that I have appointed will use the knowledge gained in that forum to, among other things, help determine what part coalitions will play in SSI outreach at both the national and local levels.

Our outreach support efforts on the national level have included:

- o providing field components with monthly public information packages containing information about the SSI program (packages include news releases and scripts for radio and TV spot announcements suitable for local media use in Spanish and English);
- o sending organizations with an interest in the SSI program the quarterly SSI Information Item Newsletter containing articles for them to publish in their own newsletters and bulletins;
- o redesigning and revising publications and other printed materials for current and potential recipients to incorporate improved graphic techniques and to simplify the language; and
- o preparing and distributing posters explaining basic SSI eligibility requirements.

In recent times, SSA has been placing special emphasis on service with regard to the homeless. Our homeless outreach efforts include:

- o appointing a coordinator in each field office where such a position would be appropriate to act as the focal point for all claims and postentitlement activities relating to the homeless;
- o encouraging district and branch managers or other appropriate field office staff to serve on interagency health and welfare councils serving the needs of the homeless;
- o assuring that local staff "network" with private nonprofit community and religious organizations serving the needs of the homeless;
- o assuring that all appropriate individuals are aware of provisions affecting the homeless, such as the provision for continued receipt of full SSI benefits for certain individuals temporarily institutionalized in public or private medical facilities;

- o reminding shelter staffs about the SSI provision that permits continued receipt of SSI benefits for 6 months in any 9-consecutive-month period for persons who are residents of public emergency shelters for the homeless; and

- o assuring that individuals are aware that there is no offset against SSI benefits because of receipt of charitable gifts based on need, from nonprofit organizations, of items such as meals from soup kitchens, clothing, and shelter.

In addition, SSA is issuing a "best practices" series which describes projects dealing with the homeless and other categories of hard-to-reach people which are working well in one setting and have potential for proving successful in another. These issuances should allow our offices and other service providers to give active consideration to practices that have already been proven in other areas.

American Association of Retired Persons' (AARP) SSI Outreach Project

Under a grant from the Commonwealth Fund, the AARP conducted an SSI outreach demonstration project last year designed to increase participation in the program. SSA, along with the Administration on Aging, cooperated with the AARP in its efforts to seek out and enroll aged persons who are eligible for, but not receiving, SSI benefits.

The outreach demonstrations took place in Pittsburgh, El Paso, and Oklahoma City. Each project was cosponsored by the local area agency on aging with assistance from senior centers, local nutrition programs, hospitals, and a variety of community service groups. Our field offices also cooperated with local area agencies on aging in the outreach demonstrations.

SSA actively participated on AARP's Technical Advisory Committee, as well as in the local SSI "coalitions" in El Paso, Oklahoma City, and Pittsburgh. We contributed to the demonstration project design, provided critical information on site selection, trained outreach workers, and provided data necessary to evaluate the project.

The AARP's final report on last year's demonstration outreach project indicates that its effort produced a substantial increase in both SSI applications and awards of benefits. Although this first phase provided no clear indication of the magnitude of the unreached population, it did establish that the type of outreach activities used should be pursued further in an effort to make SSI benefits available to as high a percentage of the eligible

population as possible. Because of our interest in pursuing these outreach techniques, we are cosponsoring the AARP demonstration project in Rutland, Vermont, this year and actively participating in projects at the other nine sites that the AARP has included in the second year of its SSI outreach project. The SSI outreach task force is considering how we can build upon these experiences to develop a model for future coalition-based outreach activities.

Special SSI Outreach Efforts

The Social Security Amendments of 1983 required ongoing outreach activity to potential Social Security beneficiaries at the time they were notified of their upcoming eligibility for Supplementary Medical Insurance under Medicare at age 65.

Since July 1983, each month approximately 110,000 potential beneficiaries have been notified about the SSI program and its eligibility requirements at the time they receive notification of eligibility for Medicare. It is estimated that this ongoing outreach effort has resulted in about 2,000 SSI awards per month since July 1983. This is almost 2 percent of the 110,000 notices sent each month. SSA is committed to continuing this effort.

In addition to this ongoing effort, in 1984 SSA sent a special one-time mailing to over 7.6 million elderly people on its rolls who were potentially eligible for SSI benefits because their Social Security benefits were less than the SSI payment levels at that time. This effort resulted in only 58,000 awards.

Our experience with this one-time "SSI Alert," which was based on a match of large numbers of administrative records with only limited screening criteria, and the use of a general message to the audience, is that such a method has limited effectiveness in locating potential SSI recipients and encouraging them to apply for benefits. We believe that such a strategy and methodology can be improved upon to make it more effective.

CONCLUSION

SSA is committed to providing high-quality service to its clientele. A major part of that commitment is bringing the SSI program to the people for whom it was designed. I have therefore established SSI outreach as a major priority for this agency. The newly established SSI outreach task force will develop an aggressive plan for reaching those potentially eligible individuals who are either not aware of the program or have not applied for benefits. I will see to it that SSA makes the extra effort necessary to provide every assistance to these individuals in applying for and in establishing their eligibility to SSI benefits.

The CHAIRMAN. Louise, do you—
Ms. SLAUGHTER. I would Tom, if I may.

STATEMENT OF REPRESENTATIVE LOUISE M. SLAUGHTER

Ms. SLAUGHTER. Good morning everybody. It is good to see Chairman Downey and my former colleagues in the State Legislature, Paul Harenberg and Pat Halpin and to meet Mr. Pitts this morning. I always welcome the opportunity to visit all regions of our great State and I am particularly glad to be here today because we are going to discuss improvements in the outreach effort to low income, elderly and disabled in New York State and throughout the Nation.

The commitment to increase cooperation among Federal, State and local levels is evident by our meeting here today. Let me preface my remarks by thanking Chairman Downey and Chairman Harenberg for bringing the deficiency of supplemental security income outreach to the surface.

I applaud the legislative initiatives you both have taken to ensure more aggressive outreach effort to the needy and the vulnerable in our communities. Studies indicate that 54.3 percent of those eligible for SSI assistance do not receive this aid. As Chairman Downey has noted, many of these elderly and disabled are assisted by State and local government programs. The cost of serving this needy population increases the financial strain on the local property base. When Federal resources exist to meet the needs of these elderly and disabled, it is wrong to shift the cost onto the already overburdened State and local entities. The need for a more directed and comprehensive Federal outreach is obvious.

I am anxious to hear from the witnesses about how our current outreach programs fall short of getting the message of available Federal help to those who are eligible for SSI. Let me share with you some of the difficulties faced in my own district of Rochester as the Social Security offices there endeavor to reach the needy of the greater Rochester area.

The Monroe County Social Security office employs only two Spanish speaking interviewers on a staff of 40. This staff serves a population whose Hispanic sector is growing rapidly and is the second largest in New York State. Social Security caseworkers there tell me that two bilingual interviewers are simply not enough. The Commonwealth Fund Commission on elderly people living alone recently reported that the Hispanic elderly suffer higher poverty rates and more acute health problems than any other ethnic group in America. Clearly, this is a group who would likely benefit from SSI. However, we are ill equipped to communicate adequately with them.

The Rochester area is one of the largest population centers in the country for the hearing impaired, since it is a large rehabilitation area and home of the National Technical Institute for the Deaf. And yet the Monroe County Social Security office lacks staff people trained in technical signing, and despite persistent requests to SSA, the TTD machine has not been installed. Indeed, mine is the only Federal office in the area capable of communicating with the deaf or the hearing impaired. The hearing impaired and non-

English speaking Americans are not the only people inadequately served by the current outreach efforts. I believe that we can and must do more at the Federal level to reach out to the homeless. Local efforts are pioneering outreach in this sector and, with some promise, but they need Federal resources to expand and to succeed.

The Monroe County Regional Council on Aging is training volunteers to recognize SSI eligibility. These volunteers work in the missions and shelters to assist the homeless in their applications for SSI benefits. Across the country however, these efforts are piecemeal. As the homeless population grows, these efforts will undoubtedly prove inadequate leaving the homeless without assistance. Such obstacles to outreach seems so obvious and yet we fail to overcome them. We all agree that the Federal Government must do its share in reaching out to those in need of SSI.

I look forward to hearing how we can improve our services to this most deserving population, and thank the Chairman for inviting me to be with you this morning.

The CHAIRMAN. Thank you, Louise. Paul?

Mr. HARENBERG. Thank you.

STATEMENT OF CHAIRMAN PAUL HARENBERG

Mr. HARENBERG. It is a pleasure to be here this morning with Congressman Downey and Congresswoman Slaughter, both old friends from many years back. And all of us I think have been interested in the problems of elderly for a long time.

The SSI issue is one which we all share an interest in because of the fact that this is really an income supplement program that reaches the most vulnerable elderly and disabled people in New York State.

We have been appalled to learn that as Louise pointed out, less than half of the people who are eligible for this income supplement are receiving it, and we know some of the reasons for that, we are really looking for what more can be done about it. SSI outreach seems to me is a key for that. We need to get into communities where the poorest, elderly and disabled people live and try to make them aware of the program and help them on a one to one basis in getting signed up for the program, because it is a complex thing to do and it is not something that everyone knows about and even if they know about it, they don't know how to go about getting themselves onto it.

This year, the State Legislature in a terrible budget deficit year in which the aging programs received almost no increases and some of them are cut, for example, even the EPIC program which I sponsored a few years ago, was cut by $10 million this year, and most other programs were sustained just at the same level they had been before, but in the midst of that difficult budget year, we nevertheless managed to appropriate half a million dollars for SSI outreach, and some demonstration programs will be going on around the State in which the State will fund groups that will go out into the communities and try to find those people who need to be signed up on this.

But, it is something that really should be being done by the Social Security Administration in our opinion. It is not something

that should require State funds, nor should it require county taxpayers funds. The county executive has an enormous problem with the deficit there as well and property taxpayers can't bear the additional costs of doing the kind of outreach that really is the responsibility of the Social Security Administration.

The testimony that was sent to us gives us some idea of what they are now beginning to do but we know that in the past during the Reagan administration, a lot of people who were on SSI were knocked off it and never managed to get back onto it, but there are also additional thousands of people across the State who never did manage to get onto it. So, it is a job that we all need to work on together. Outreach is the key to it, it seems to me, and the outreach has to be more than just a mailing by the Social Security Administration because these mailings don't really get people signed up. It has to be a one to one kind of thing and we have to work with groups who are in the community who know where the people who need this SSI are located and can reach them and sit down with them and help them fill out the forms and get them onto the SSI program, so that they can get the benefits of this supplement which is so important, so critical to their sustenance.

Federal dollars which are being lost to poor people in New York State who badly need them are something that we really ought to be going after and State dollars also. There is a supplement, of course, that is added to it by the State, the major portion of it is paid by the Federal Government.

We are losing the benefit of those dollars in our State for our poorest people because of our failure, I guess, to get out to them and get them signed up and so that is the purpose of our meeting today is to try to bring attention to the problem, to focus on how can we best accomplish the objective of getting that other, more than 50 percent of the elderly people and disabled people who are currently not receiving a benefit that they are entitled to, and which is available for them, but which they either don't know about or they don't know how to get it. That is the purpose of our being here.

Thank you very much for joining us today.

[The prepared statement of Chairman Harenberg follows:]

PREPARED STATEMENT OF CHAIRMAN PAUL HARENBERG

Good morning. It is a pleasure to sit on this panel with Congressman Downey, Congresswoman Slaughter and Congressman Blaz to begin to discuss SSI outreach efforts being made by the federal government.

As Chairman of the New York State Assembly Aging Committee, I have a keen interest in the SSI program. The program, which assists low income elderly and disabled with supplemental monthly payments, is a critical one, and one which we have a responsibility to make more accessible.

While we in the Aging Committee have on our agenda for the 1990 session securing an increase in the state supplement to SSI, we must not forget that without adequate outreach, by both the state and the federal government, the program will not be utilized by thousands of eligible individuals throughout the state. Statistics show that over 50% of those eligible for SSI do not currently receive it. Concerned about those alarming figures, the Aging Committee in 1989 established a SSI outreach campaign, administered by the State Office for the Aging. Up to 10 grants will be issued by SOFA to not-for-profit organizations or local offices for the aging to provide outreach across New York State. I am pleased that in New York we are moving forward, attempting to reach shut-ins, those weary of government programs and those confused or intimidated by the application process for the SSI program.

It now remains to be seen whether the federal government is willing to share in this responsibility. New York, or any state for that matter cannot do it alone. The state and federal governments must work <u>together</u> to raise enrollment in this critical program. The Social Security Administration must attempt innovative methods of outreach if traditional means fail to break the barriers which exist. Only then will the SSI program reach its full potential, reaching those with the most reluctance to this assistance.

The question asked at today's hearing is "SSI outreach: Is the Federal Government doing enough?" Hopefully, through testimony that we hear today, we can answer this question and begin to move in the right direction, working together.

Mr. DOWNEY. Paul, thank you. We are missing Congressman Ben Blaz who is a delegate from Guam. I am assuming his is not coming—oh, he is on his way, he is coming from Washington, but we will welcome him when he arrives. It is not often that we have a Guamanian here in Suffolk County and we are delighted that Ben wanted to join us. I don't believe they have SSI in Guam, it will be interesting.

I will submit the prepared statement of Mr. Blaz for the hearing record at this time if there are no objections. Hearing none, so ordered.

[The prepared statement of Representative Blaz follows:]

STATEMENT OF THE HONORABLE BEN BLAZ

JOINT FIELD HEARING OF
U.S. HOUSE OF REPRESENTATIVES SUBCOMMITTEE ON HUMAN SERVICES
AND
NEW YORK STATE ASSEMBLY STANDING COMMITTEE ON AGING

OCTOBER 2, 1989
10 A.M. - 1 P.M.

Clayton Central Islip Senior Citizen Center
Central Islip, New York

Mr. Downey, and Mr. Harenberg, I commend you for holding this important hearing to renew our commitment to reach out and meet the needs of the poor elderly, disabled and blind. I am looking forward to hearing testimony from the distinguished panel of witnesses who have worked so diligently to implement innovative Supplemental Security Income (SSI) outreach programs in the State of New York.

Since the SSI program was started in 1974 to help those who subsist below the poverty level, only about 50 to 60 percent of potential recipients have participated. Although the program has many limitations and problems, it is still the only cash assistance program which helps the poorest of the poor. It is imperative that we exhaust all our efforts and resources to help more people to benefit from the program as we continue to improve the program itself to reflect the real needs of the present participants. Many of these potentially eligible people are simply unaware of the program or are apprehensive about burdensome bureaucratic paperwork. And as always seems to be the case, the minority elderly show the least participation.

It is ironic, however, that we are concentrating on outreach programs when some Americans are unable to receive the benefits at all. The attempts to extend the benefits to the poor elderly, disabled and blind on Guam and other territories have been aborted repeatedly. Yet, the District of Columbia and the Commonwealth of the Northern Mariana Islands participate in the program. It is time to rectify the past discrepancies and injustice done to the people on Guam and the other territories. Mr. Chairman, you have always fought in the forefront for the most vulnerable of our society. I urge you to help our fellow

American citizens on Guam also be included in the SSI program as the rest of the nation.

Getting back to the issue at hand, over the last 15 years, we have identified many problems and have experimented with various techniques for outreach. Although, the Social Security Administration has made constant efforts for effective outreach strategies, I must stress that the federal government can still do more to assist the area agencies on aging and other local organizations.

In that regard, I commend you, Mr. Chairman, for taking the leadership in introducing legislation that has been included in the FY 1990 Budget Reconciliation Act to establish a permanent outreach program for adults. I look forward also to working with you to ensure funding for the outreach programs during the upcoming reauthorization of the Older Americans Act in 1991. Furthermore, I commend Mr. Harenberg's initiative to expand the SSI outreach effort at the state level by funding up to 10 qualified non-profit organizations or area agencies for outreach activities.

Today's hearing provides an excellent opportunity to funnel tested results and recommendations for more effective outreach to the federal government. Let us keep the pressure on to advance the concerted efforts among the federal, state and local agencies to serve the most needy and helpless.

Mr. DOWNEY. We will now hear from our first panel of witnesses which include our County Executive and the Supervisor of the Town of Babylon. Mr. County Executive, we know of your interest in this and the outstanding program that Suffolk County has and we welcome your testimony.

PANEL ONE, CONSISTING OF PATRICK G. HALPIN, COUNTY EXECUTIVE, SUFFOLK COUNTY, NY; AND ARTHUR G. PITTS, SUPERVISOR, TOWN OF BABYLON, NY

STATEMENT OF PATRICK G. HALPIN

Mr. HALPIN. Thank you Tom, and it is a pleasure for me to be here with you as Chair of the Human Services Subcommittee of the Aging Committee, and my former colleague, Louise Slaughter, who I had the privilege of serving with in the New York State Assembly and Assemblyman Paul Harenberg, the Chair of the Aging Committee of the New York State Assembly, and it is extraordinary to be able to get all of you together to talk about this very very important program and I appreciate this opportunity.

The question the hearing is addressing, SSI Outreach: Is the Federal Government Doing Enough, would be answered differently depending on who is being asked.

If we asked the 27 year old woman suffering from Bells Palsy, diabetes, nerve damage and hearing loss, a woman who has repeatedly denied SSI benefits, how she would answer the question, she would probably answer, "no".

If we asked the 47 year old man who suffered from severe epileptic seizures since childhood, the man whose only source of income was SSI until he was terminated in 1981 and was forced to live on the streets with no income, he would probably answer that question, "no".

If we asked the 50 year old woman with a long history of psychiatric problems who was denied SSI benefits several times, she would probably say, "no".

These are just three examples of people who finally did obtain SSI benefits through Suffolk County's Disabled Clients Assistance Program, our DCAP program. The man with epilepsy who was terminated in 1981 was not only reinstated, he was awarded payments retroactive to the date of his termination. The two women in both cases were granted SSI benefits after appealing the initial denials to an administrative law judge.

Now DCAP was established in Suffolk County in 1986 as a pilot program. The original aim was to have DCAP personnel work with clients at the initial SSI application stage with the objective of assisting home relief recipients who are deemed disabled. Suffolk took the program further. Working with clients up to and through the appeals process before an administrative law judge.

DCAP staff served clients who had trouble pursuing these benefits on their own behalf and that is very important. Many of these clients exhibit characteristics such as difficulty communicating or understanding verbal or written instructions. Unusual social or behavioral patterns, poor or inconsistent work histories, inability to use public transportation or travel alone or lack of motivation or willingness to cooperation in the SSI application process.

DCAP provides various levels of support during the initial denial and appeal stages of the SSI determination process. Staff monitoring the filing of timely appeals, assist clients with medical verification and transportation, and advocate on their behalf before the administrative law judge.

In addition, DCAP staff performed a critical liaison function. Workers are involved in all aspects of the determination process. They channel information between Social Security and the State Office of Disability determination, until a determination is made on the application. If the client is denied benefits, DCAP staff review the case and make a decision whether or not they should appeal it. If new medical data can be submitted or if a client's condition has deteriorated, an appeal is certainly sought. If there is a denial at the reconsideration stage, the first level of appeal, the worker or client can request a second level of appeal where an administrative law judge hears the case. In Suffolk County, our DCAP unit is successful in approximately 95 percent of the cases heard by administrative law judges.

In 1988, 82 clients were awarded SSI benefits through our DCAP program which had a staff of just two people. The net savings to the county amounted to more than $730,000. In addition to benefiting the county financially, DCAP benefits our clients in ways that I will mention shortly.

Because of the tremendous success of the program, we are expanding in 1990 if the legislature approves my budget as I have submitted to them. In addition, we now have a dual team approach. One team works with clients on medical assistance who should be Federal participating, FP clients. When a client is deemed FP, the county pays 25 percent of medical expenses as opposed to 50 percent of expenses if a client is not deemed Federally participating. This team is responsible for obtaining FP status at intake, and then referring the client to the second team which then works to obtain SSI benefits. The second team is also responsible for reviewing home relief clients who have been denied SSI to determine if an appeal or a reapplication is warranted. They also examine the records to identify those home relief recipients who never applied for SSI and should have.

Altogether, there will be 11 staff people on these teams in 1990. That additional staff is going to cost us $126,000, but we project that the savings to the county and to our taxpayers will be more than $3.3 million. We project that about 270 SSI cases will be awarded and more than 500 clients will obtain FP status.

Despite the hiring freeze and austerity measures and program cutbacks that I have implemented to deal with Suffolk County's fiscal crisis, DCAP is being expanded for the simple reason that it enhances benefits to needy clients while saving the county millions of dollars, saving our taxpayers millions of dollars.

In addition to the financial benefits for both the client and county, DCAP streamlines the SSI application process for the targeted population, providing clients with the logistical and moral support that can often mean the difference between being denied or being approved the benefits they need, they deserve and that they are entitled to. Application approval very often results in the clients receiving more income. It never results in a client's benefits

being reduced. Further benefit to the client from receiving SSI as opposed to home relief is that they don't have to be recertified every 6 months which is an extremely cumbersome process, and also a humiliating process for the individual client.

DCAP improves communication between local, State, Federal and legal aid agencies helping us all render services more efficiently and more effectively. Employees involved in DCAP you should know derive an enormous amount of satisfaction from following through on a case and seeing clients particularly those who are at least able to help themselves receive the benefits they deserve.

Here in Suffolk county, we are also doing all we can to ensure that all eligible participants are enrolled in the SSI program. There are about 2,000 unemployable people in the home relief program and thus potentially eligible for SSI. In 1990, with our enhanced DCAP program, we expect to have 270 cases awarded, better than 10 percent, of all unemployable home relief clients. This number viewed in conjunction with our 95 percent success rate on appeals to date, indicates that the Federal Government is not doing all it can to ensure full participation in the SSI program.

A greater outreach program directed both at senior citizens who are automatically age eligible and younger disabled people would directly benefit our taxpayers here in Suffolk County and taxpayers all across the State and the Nation, as well as those who would be receiving the SSI benefits. Suffolk's taxpayers would realize significant savings as people are moved from State and locally funded home relief to federally funded SSI. The $3.3 million net savings in 1990 is really just the beginning.

Equally important, the individuals now on home relief who should be getting SSI would receive the same or an increased level of benefits. They could avoid biannual home relief recertification and their dignity would be enhanced because they are being identified as what they are—they are disabled individuals.

Suffolk's DCAP effort is both an outreach and advocacy program. We reach out to our unemployable, disabled, home relief population and we advocate strongly on their behalf so they can obtain SSI benefits. While I am extremely gratified by the success of the program both as it relates to savings to our taxpayers and as it benefits individual clients, we must be mindful why we have this program in the first place. If obtaining SSI benefits was not as difficult as it is for the disabled, both in terms of negotiating the bureaucracy and in terms of initial agency determinations, Suffolk County wouldn't need to be spending the hundreds of thousands of dollars that we are now spending on our DCAP program.

For the time being though, we recognize that we do need such a program. What I would ask of the Federal Government is that it take a hard look at the SSI application and determination process so that lengthy appeals and reapplications can be avoided. When that happens, we can ask whether the Federal Government is doing enough that all eligible participants are enrolled in the SSI program and the answer I am sure would be "yes", certainly a lot different from what we are hearing today.

Thank you very much Congressman, I will be happy to answer any questions.

Mr. DOWNEY. Thank you, Pat. We will hear before we counter any questions from Supervisor Pitts. Arthur?

STATEMENT OF ARTHUR G. PITTS

Mr. PITTS. Thank you, Tom, members of the panel, members of the media here, ladies and gentlemen, good morning. I would like to try and set the stage for those people here who really don't have a feel for what the Town of Babylon is and just give them an understanding of what perspective I bring to this hearing.

The Town of Babylon is the sixth most populous town in New York State, out of some 932 towns. It consists of approximately 213,000 people in an area of 53 square miles which makes it the most densely populated town in Suffolk County. I think it stands right in the middle between the larger more populated towns in Nassau that you see, Hempstead, North Hempstead and Oyster Bay and is representative of the changes as you move from Nassau County into a slightly more rural, although increasingly urbanized Suffolk County.

As far as this program goes, the Supplemental Security Income Program presently serves approximately 5,000 residents in the Town of Babylon. In an effort to accommodate the aged, the blind, the mentally and physically handicapped, the State and Federal Government issues monthly payments to those in financial need and according to the United States Department of Health and Human Services, people may be eligible for SSI payments if they have little or no cash and do not own much in the way of resources that can be turned into cash.

The Town of Babylon in the State that it is in, moving from this somewhat suburbanized to somewhat more ruralized Suffolk County, has been experiencing a substantial metamorphosis within the past few years. As a result, these changes, and the lack of economic mobility, have caused the low income population level to grow in our town. Presently a proportionate amount of our elderly are being served through emergency shelters, Section 8 housing, soup kitchens and commodity distributions. The town has two complexes under Section 8 housing which accommodate 100 of our elderly. Consequently, there is a 4 year waiting list. In addition to the elderly, the town serves approximately 107 handicapped residents through our Town Human Resources Department.

All of the remarks we that we make today must be, in my view as a local official, set against a backdrop of two very important factors. We like to think of ourselves in town government as that level of government that is closest to the people. I believe that we are generally the first phone call that is made when a resident has a problem. Somehow it seems to come to Town Hall first and then from there usually gets referred to the appropriate agency. In view of that, I think there should be a greater effort to educate some of the people in town government to the availability of this program and what is necessary to get people involved in it. I have two citizens advocates on my staff that take the problem calls, as we call them, and they may not be fully aware of just what it takes to get people involved in this. I think that any educational process in an effort to get more people involved must necessarily include getting

those people that do the referrals in local government involved and educated about just what is available there.

The second element that quite clearly has to be discussed in the context of this today is the problems that we face in the town relative to property taxes. The overwhelming message that I hear as an elected Representative when I go around my town is the need for tax relief in the town. Whether I go to our senior citizens centers where people are telling me that they can no longer afford their homes, or whether I go to civic groups where people tell me that the property tax situation is driving them out of their homes or ruining the quality of their life on Long Island, whether I talk about scientifically done surveys wherein you ask people an open ended question, "What is the biggest issue in the upcoming election?", it doesn't matter, the issue there for the local government is and will continue to be I believe for some time to come, taxes and it is largely as a result of the, at least on a town level, the limited sources of income that we have, with an ever increasing cost in government. I have a town payroll that by contractually obligated salary increases, goes up $1 million a year and that only provides for approximately 5 or 5.5 percent raises to blue and white collar unions in the town.

If you are going to meaningfully impact on property taxes, while you must per force increase your expenditures $1 million a year, quite simply, it is a juggling act that has to be taken into account whenever you talk about something like this and your sensitivities to that as indicated by your opening remarks are truly appreciated.

While the numbers of our seniors and disabled are rising, we have a responsibility to promote a more stringent outreach to that potential public that can be served by that. Only 5,000 out of our 213,000 residents are recipients of SSI benefits.

Aside from those who need to be informed of the SSI program, there are a number of concerns that were brought to my attention from residents who are currently participating in the program and I would like to think that is where I might be of some assistance to you in terms of what we hear at the local level.

Number one, we are advised that it is extremely difficult for a patient to find a participating physician. For whatever reasons, the physicians are not participating. I know to an extent, on first blush it might sound a little simplistic, but perhaps if the enrollment was increased, there would be more—a simple supply and demand would seem to indicate that there might be a move in the market place of medical care to provide those services. So, to the extent that enrollment can be increased, there is at least a potential there to possibly address that problem. Physicians might find it in their best interests to serve a larger market.

Number two, if a disabled individual can obtain employment, he or she cannot earn over $300 a month. As a single individual living alone, SSI pays $454 a month and $655 to a couple. Whatever the recipient earns above the $300 figure is either deducted from the cash benefit, or the recipient is completely terminated from the program based on State investigations. That is a remarkable disincentive not to go out there and try to do something on your own behalf it seems to me.

Third, parents of disabled children participating in SSI are questioning why a visually disabled person is awarded a higher payment then a physically handicapped person. For example, if both a physically handicapped and visually handicapped SSI recipient are working, the visually handicapped person is allowed to earn a higher income without being penalized.

I would suggest that we establish a uniform benefit that is not favorable to any particular group, as they all experience similar financial handicaps.

The Town of Babylon has special needs. We have an increasingly low income population. Within that population, one segment needs to be educated about the SSI program, while the segment which participates has concerns to be addressed. Among the elderly and disabled, there seems to be a lack of knowledge or information regarding SSI and the Town of Babylon, and municipalities should step up their efforts to educate their residents about this necessary program. Today's costs and expenses have overburdened our elderly and handicapped and this crisis must be resolved. SSI is a supportive program and given appropriate funding from the State can bring the financial balance back into their lives.

The last item I would like to address is what I believe that I can do and what I believe I can do is to use the arm of our local government involved in public information to try and help to get the word out about the availability of this program which leads me to my final point which is to thank you for allowing me to participate in this because you quite frankly have educated me or at the very least, I have had to educate myself about this program in order to speak to you today, and by knowing more about it, I stand in a better position to communicate the needs for this program and what we can do in our town to all of the residents in the town, and I think they will benefit from that so, again, thank you for allowing me to testify and if I can, I will be happy to answer any questions.

Mr. DOWNEY. Thank you, Arthur. Pat, let me ask you, home relief is financed in Suffolk County through the towns and the State, is that right, or does the county have a role in it?

Mr. HALPIN. No, the county runs the home relief program through our Department of Social Services.

Mr. DOWNEY. So, the county picks up half of the cost and the State picks up the other half of the cost?

Mr. HALPIN. That's right.

Mr. DOWNEY. How large, do you have any idea off hand, how big the home relief program is right now?

Mr. HALPIN. Well, we have about 2,000 individuals who are on home relief who are considered unemployable. I would be happy to share with the subcommittee additional information on families and others who are on home relief. We have found this year, particularly, that the numbers are increasing and part of it might be due to layoffs in the defense industry and other things that are happening economically, but that number is growing.

Mr. DOWNEY. And the original reason for DCAP being set up?

Mr. HALPIN. What we found, Congressman, is that there were a lot of people who were on home relief who were physically disabled, who have some mental disabilities, who were denied SSI ben-

efits. We also found during the early 1980s when the administration was throwing people off SSI that they ended up becoming an expense for local government, for us, they went on home relief. And after evaluating hundreds of cases, the county found that indeed they were eligible for SSI and they needed to have an advocate for them. So, the county back in 1986 began a very very modest program to assist people, appeal their SSI denials or removals, and to get them back on SSI. The success rate was overwhelming. Now, they carefully considered the cases and they went at this objectively but we found that as we have expanded this program, the savings to the county is so significant that we can't afford not to spend local money because the net savings is so significant.

Mr. DOWNEY. This comes also down to a question of philosophy I think that I believe we share and that is that the national responsibility for income maintenance is just that—it is a national responsibility, it is not people who are poor who live in Suffolk County should not be treated any worse or better than poor people in Louisiana, or in some other part of the country. We have Supplemental Security Income as an income floor for the aged, the blind and the disabled, and you were pointing out I believe that this results in the income maintenance effort increasing so that no one loses money by moving from home relief onto SSI. For those of you who have not seen this form, an application for Supplemental Security Income, this is a daunting application even for someone who is well able to work through it, not someone who might be frightened about apply to a government agency or having been turned down at one point.

Mr. HALPIN. Our staff will literally sit down and go through, point by point, with a client and not only helping them with the application, but making sure that they get the necessary documentation to improve their case. Over the last 8 years, the amount of Federal aid coming to Suffolk County has been cut in half. I am sure that County Executives all across America can make the same claim. We are being asked to do a lot more and the programs and services that we have all come to depend on that were partially funded by the Federal Government continued. The people locally do not want to hear that the Federal funds have been eliminated so that is why we have to cut back this program.

Now, in the mid 1980s when our economy was growing all across the State and the county, the State and the county was able to back fill some of those cuts. We are not able to do that anymore. So, this is one of those rare opportunities where we have a chance to push some of this burden that the Federal Government has pushed on us over the last 8 years, back to the Federal Government, relieve our taxpayers millions of dollars in expense and have the client, have the individual, the family, treated with more dignity and more respect, so it is a program that I am very very committed to. Ideally, I would love to see the Federal Government underwrite this.

I think one of the problems we have and I really didn't mention it in my testimony is that the Social Security Administration is trying to do everything it can to hold down the numbers of people on SSI and you need to have some type of independent entity that can really be out there as an advocate. Now, ideally, it would be

great if there was an independent arm of Social Security that can help people advocate for them, but that doesn't exist now. It is in our interest to do that for them because we get that population, they end up going on our welfare roles otherwise. But, we also feel that if there is going to be money coming, it you can provide funding to local social service agencies to help underwrite these costs, that would help us tremendously.

Mr. DOWNEY. Let me just make one last point and then ask my colleagues to inquire. There is a terrible cynicism out there when the Federal Government makes people eligible for programs through an entitlement and lists what the criteria for eligibility are, and then decides not to go around and tell anybody that they are eligible for the program. In the 1960s, of course, you had programs and you had advocates financed by the government to go out and actually find welfare recipients and that died in the mid 1970s, and then all through this period as you suggest in the 1980s, we have had the Federal Government play an active role in limiting—in the early 1980s, the people who were on disability were denied disability claims as a function of budget reductions and what we need to do is turn the corner here.

These are people, after all, and they should be treated with dignity and respect and they are the most vulnerable and I applaud you, Pat, for the work that is being done and Arthur, the extent that the town gets involved, you are right, you are the first phone call that people get and they should have some sense that there is a voice there at local government prepared to work with the county and the Federal Government, but there is more money in it. I am hopeful that the Senate will approve what we have done in the House and expand this program.

Paul, would you like to speak?

Mr. HARENBERG. Yes, I think it is ludicrous that we should be looking at a situation which is a tug of war going on between the Federal Government and the local and State governments over an issue as important as this as how to provide money for people who are the most needy of our population and I think this DCAP program that you have described is an excellent example and a model. And I am just wondering whether you know whether other counties are doing similar kinds of things and had the same kind of success your DCAP program has?

Mr. HALPIN. I am not aware of any other county in the State that has gone about it as extensively as we have, but we have been sharing this information with other county executives who are all struggling with the same problems that we have here—how do you hold down taxes, make sure you have dollars available for those services that are essential, and how do you control some of these mandated costs? You know, you hear from county executives and other people on the front line that your cost of mandates continue to go up and, indeed, they do go up. We are reducing, for example, in my 1990 budget discretionary spending by $25 million over what was spent, or less than what was spent in 1989. My mandated portion of the budget continues to grow, it is almost 50 percent, so we are doing that as a way—this DCAP program takes on even greater significance because home relief is mandated, we have to provide that and we have to provide our share of the cost, we have no

choice. But that doesn't mean that we can't look at it as creatively a possible and try to figure out ways that we can hold down those mandated costs and this is one way of doing it so there are other counties around the State that are very interested in this as well.

Mr. DOWNEY. Louise?

Ms. SLAUGHTER. Pat, on DCAP, you just search your home relief roles to choose people that you want to check for eligibility?

Mr. HALPIN. Yes.

Ms. SLAUGHTER. Do you expand the program beyond your home relief roles?

Mr. HALPIN. Well, right now we believe that there are a significant number of people on home relief that are eligible for SSI, so that is our primary focus, but there is no reason why it couldn't be expanded to other areas, it is just a question of where do we start. We think that we will get the greatest return in that area, but clearly, there are other opportunities there as well.

Ms. SLAUGHTER. How extensive is your homeless population here?

Mr. HALPIN. Our homeless population is growing. In fact, we are going to be breaking ground on a new transitional facility run by Andrew Cuomo's HELP Organization later on this month. The fastest growing segment of our homeless population are women with children. Now, some of them have problems that could make them eligible for SSI, some of them are drug and alcohol dependency problems. We are trying to address those underlying problems through programs like the HELP project but, in the meantime, they are unable to support themselves or their families. Another large segment of our homeless population are singles. Mostly people who are—some people who are discharged from local hospitals and people who are drug and alcohol dependent and they are unable to work.

Ms. SLAUGHTER. And they would be eligible?

Mr. HALPIN. So they would be eligible. But, we are—and we are opening another shelter run through a group called Apple which is a drug and alcohol treatment program for single males so we are trying to address this in a holistic fashion and frankly, what we are doing, is diverting the millions of dollars that we are presently spending to put people in welfare motels, into programs that we think would provide a level of support that simply doesn't exist at this time.

Ms. SLAUGHTER. Thank you. Let me yield to my colleague Mr. Harenberg.

Mr. HARENBERG. I had another thought. It seems to me that one group that we may be missing somehow is those who have a language problem and, as you know, Suffolk County has a substantial Hispanic population. In fact, Central Islip where we are sitting now, has a substantial number of people who don't speak English, and I wondered whether any of the work DCAP has done was in Spanish and whether they have made contact with some of the agencies, the local community groups who work with Hispanic people, such as PRONTO and Allante and La Union Hispanica, you are familiar with those, aren't you?

Mr. HALPIN. We work closely with local advocacy groups and we have bilingual staff not only on the DCAP teams but also in other

agencies throughout—other departments within social services. That was an area that we have tried to expand the pool of people who are bilingual so that we can better outreach to our large and growing Hispanic population. Suffolk's Hispanic community is the largest of any county outside of the city of New York and it is growing.

Mr. DOWNEY. I want to personally welcome you and thank you Ben for coming to the hearing—if you have any questions.

Mr. BLAZ. Let me just start with Tom because I want to make sure that you had a senior citizen on the group to give a little interpretation to all of this. First of all, I commend Mr. Harenberg for holding this hearing. Social welfare for the poor elderly, disabled and blind is a very emotional issue for most of the communities, and unfortunately, it is not addressed very often. Today's hearing provides us with such an opportunity to address problems with the Supplemental Security Income program. To give you an idea of the problems and inequities of this program as alluded to by one of you, I represent a district that does not receive SSI and its residents are just as loyal American citizens as anyone in other parts of the Nation. It is a very inconsistent arrangement. However, I should not expound on the injustice done to my island too much, because I am here today to listen, and you have given some very good testimony.

Mr. DOWNEY. It's smart here.

Mr. BLAZ. Let me ask you this question. Of the number of people that are eligible for SSI what is your estimate of the number that are not taking advantage of it for whatever reason?

Mr. HALPIN. That is a good question Congressman. I can't answer that off the top of my head. We do know that a substantial number of people who are on home relief are eligible for SSI, but it requires the type of intensive case management that I described before that helps them get through the application and appeals process in order to get them collecting the benefits that they are entitled to, so I would imagine that there are thousands of people who are potentially eligible for SSI that are not receiving those benefits that they are entitled to.

Mr. BLAZ. Are there any that view the procedure as degrading and would rather not put up with it?

Mr. HALPIN. It is extremely degrading. First of all the application itself is very complex and involved and lengthy. The other problem you have is, our experience has been, that the local office, while responsive, does not assist people to the extent that they ought to, to help them with that application process. What happens is that the people end up becoming so turned off by that, that they ultimately end up in the local Social Service office applying for home relief. They are eligible for home relief and they receive it. In the meantime, what we try to do is to identify those people either when they are initially applying for home relief and assist them so that they can reapply for SSI if they have been denied inappropriately or, if they are already on home relief, we are reviewing their cases and will assist them with an appeal. We are then able to recoup some of the costs that we have spent on home relief, but it becomes a very involved and cumbersome process and frankly, I think one of the benefits to SSI is that you are part of the Social

Security System, you are not on welfare as it is perceived by the public. If you are on home relief, you are part of a system that in and of itself is very demoralizing, not just to the individuals but to their children and the other family members who are depending on that source of income.

Mr. BLAZ. Thank you. It seems to be an area that leaves us to do some revisiting.

Mr. DOWNEY. Yes, we are going to be spending a lot more time on this issue Ben and we will also be addressing the problem that you folks have in Guam as well and as American citizens they should not be denied the full range of benefits that other American citizens are entitled to. Pat, Arthur, thank you very much for coming to respond this morning.

Mr. HALPIN. Thank you.

Mr. PITTS. Thank you.

Mr. DOWNEY. Next we will hear from the second panel, Jack O'Connell, Director of the Health and Welfare Council of Nassau County, Linsley Piper who is the Statewide Family Care Coordinator of the New York State Office of Mental Health and the Bureau of Long Term Care, and Edwin Mendez Santiago, who is the Director of RAICES of Brooklyn, New York.

Jack, why don't you start and everyone will be quite when you start.

PANEL TWO, CONSISTING OF JOHN T. O'CONNELL, EXECUTIVE DIRECTOR, THE HEALTH & WELFARE COUNCIL OF NASSAU COUNTY, INC., ACCOMPANIED BY KATHLEEN KELLY, PUBLIC POLICY DIRECTOR, HEALTH AND WELFARE COUNCIL OF NASSAU COUNTY; LINSLEY PIPER, M.S., STATEWIDE FAMILY CARE COORDINATOR, NEW YORK STATE OFFICE OF MENTAL HEALTH, BUREAU OF LONG TERM CARE; AND EDWIN MENDEZ SANTIAGO, EXECUTIVE DIRECTOR, RAICES, BROOKLYN, NY

STATEMENT OF JOHN T. O'CONNELL

Mr. O'CONNELL. Good morning. My name is Jack O'Connell. I am the Executive Director of the Health and Welfare Council of Nassau County. The council is a private, not for profit, health and human services planning agency that has served the residents of Long Island since 1947. The Council is composed of more than 300 voluntary and public agencies that provide health and human services for the people on Long Island.

I also serve as the Chairman of SENSES and the New York State Counterbudget, which is a coalition of labor, religious and human service organizations concerned with legislation and public policy affecting New York State's low income and working poor populations.

Over the past decade, we have witnessed the dramatic erosion in the fiscal status of our region's most vulnerable. Earlier in this decade, the Health and Welfare Council's member agencies reported a rapidly increasing incidence of hunger and homelessness among Nassau County's 100,000 poor and near poor populations. It was inconceivable to some that these reports were indicative of widespread social problems in one of the wealthiest regions in the

Nation. A region that was by most measures experiencing unprecedented economic growth.

At that time, council decided to determine the extent of the problem by undertaking and publishing two studies on the incidence of hunger and homelessness among the region's poor. Council's team of social workers and registered nurses interviewed more than 450 adults. The results documented that the target population had been unable to enter into the economic mainstream and were suffering severe nutritional and housing problems.

Within the past year, council's agencies have been reporting another severe crisis being experienced by our most vulnerable population—the Island's 24,000 impoverished blind, elderly and disabled. Unable to participate in the now diminishing economic upswing, the front line providers reported that SSI population is teetering on the edge of economic disaster.

Council has responded to these reports by attempting to document the nature of this crisis through an incidence study. During the spring of this year, council's interview team under the direction of Kathleen Kelly from our staff, interviewed 120 individuals on Long Island from the target population. We are presently concluding an analysis of this data. To this point, the results conclusively document the concerns of our front line providers. The impoverished blind, elderly and disabled are experiencing a severe economic crisis in one of the Nation's wealthiest regions.

In New York State, 9 out of 10 SSI recipients lived in the community with the remaining 10 percent living in congregate care facilities. This proportion is reflected in council's study as 89 percent of the 120 individuals were living on their own in the community. Of these, 72 percent were or have recently been on SSI.

The council feels that the following results are significant to report to you at this time about the status of the SSI population on Long Island.

First, who is this SSI population on Long Island? The data informs us that the population is predominantly made up of disabled, elderly women who live alone:

nearly half of those SSI recipients interviewed, 46 percent, were over the age of 64;

two out of three of this group, 65 percent, were female;

58 percent of this group of women were elderly;

66 percent of the females in this group first received SSI because they were disabled; and

93 percent of these women live alone. Nationally, only 72 percent of the elderly SSI women live alone.

What is their financial Status? The survey data closely corresponds to the anecdotal reports by provider agencies and national statistics. Nearly the entire SSI population interviewed relies on the SSI benefit, however inadequate, as their sole source of income:

the present maximum benefit level for individuals living alone in New York State is $454 per month of which about 15 percent is picked up by the State;

the maximum benefit for couples in New York State is $655.50;

Council's survey indicates that more than four out of five of those interview, 81 percent, received less than the maximum benefit;

3 percent of the individuals on SSI reported having earned income; and

40 percent of those elderly SSI clients interviewed were not receiving Social Security leading council to believe that this population has never been a part of the workforce.

This is higher than the national average which shows that 30 percent of those on SSI do not receive Social Security:

almost half of those interviewed, 48 percent, did not have any resources, not even a bank account;

of the remaining 52 percent, more than half had resources totalling less than $500; and

89 percent reported that they didn't even have burial funds to ensure a dignified funeral.

What is the quality of life of this SSI population on Long Island? The data strongly suggests a population in crisis that lives in impoverished circumstances amidst great wealth:

almost 40 percent live in multiple dwelling or apartment building;

almost 30 percent live in a single room or in a private house;

only one individual lived in a shelter;

the average monthly rent being paid by those SSI clients interviewed was $250. The average Long Island SSI client was paying more than 55 percent of his entire benefit grant on rent; and

We drop back for a moment to remember that the large portion of this population receives no other income other than the grant, and 55 percent of it is going for housing; 37 percent reported that they used soup kitchens or food pantries on a regular basis. And also disturbing, only 56 percent were receiving food stamps, another Federal program.

Are there people on Long Island who are eligible for the SSI program and not using it? The data strongly suggests that not only is the basic rent level inadequate, but thousands of eligible Long Islanders are not participating in this program, for a variety of reasons:

31 percent of all those interviewed not participating in the program, did not even know that SSI existed;

of this group not participating in the program, many were ignorant of the eligibility requirements, felt unable to meet the complex documentation requirements, and complained of red tape and harassment; and

27 percent of those not participating had applied and were denied.

We believe that when we release this study, it will further document that the draconian cuts in services and benefit levels at the Federal level over the past decade have left most of our vulnerable population in extreme fiscal risk. Furthermore, the shift in Federal priorities has placed the onus of providing services to this population squarely on the shoulders of the localities who do not have the resources to approach these problems adequately.

The plight of the vulnerable is a national problem and must be addressed at the Federal level.

The Health and Welfare Council makes the following recommendations:

We recommend an increase in the benefit level to ensure that dignified existence for the most vulnerable of our society;

We recommend an increase in the asset level which at present is set at $2,000 for single individuals, and $3,000 for couples. An increase in the asset level would make more people who are at the edge of poverty eligible for this very important Federal benefit;

Reduce the one-third reduction rule;

Reduce sanctions for in kind assistance; and, finally,

Introduce and fund an aggressive grass roots SSI Outreach Campaign.

We at the Health and Welfare Council already run an aggressive grass roots nutrition campaign funded with State and some Federal dollars. The impact of this outreach program has been dramatic that we have been able to get people who have been suffering from a nutritional crisis onto the Federal programs, food stamps, WIC, and the like. We believe that if outreach is done properly and appropriately by grass root organizations, that it will, indeed, increase the amount of people who are presently eligible and not receiving this very important program.

Thank you for giving me the opportunity to whip these statistics on you, and I hope that they do, indeed, help you in changing not only the benefit levels but the patterns by which people are forced to live in these very difficult situations in a very wealthy region.

Mr. DOWNEY. Thank you, Jack. Linsley if you would proceed next.

STATEMENT OF LINSLEY PIPER

Ms. PIPER. I would like to thank you for allowing me to be included in the SSI joint public hearing. My name is Linsley Piper and I am representing the New York State Office of Mental Health, Bureau of Long Term Care, on behalf of Dr. Barbara Morrison. I am the Statewide Coordinator for a residential program entitled Family Care.

My purpose in addressing you today is to describe the Family Care program, outline its current funding sources and outreach system, and to express the continued need to maintain SSI payment levels in concert with cost of living increases.

Family Care is the oldest and least costly form of residential care funded by the New York State Office of Mental Health. It's daily cost is approximately one-eighth that of inpatient psychiatric care. This program provides flexible 24 hour supervised residential services in small, natural family settings. Mentally ill individuals are placed in private homes specifically matched to their own individual needs in order to provide a consistency of supervision and stability not available in residential options with shift staffing patterns.

Family Care providers are trained to manage a variety of placements including individuals who have reached their maximum level of independence and are in need of long term care; individ-

uals whose level of disability requires consistent care for extended periods of time in order to increase their level of functioning; geriatric individuals, physically disabled persons, the young adult seriously and persistently mentally ill in need of small group settings and the chronically disabled patients.

Approximately 19 percent of the Family Care residents also receive hands on medically related services. Medicaid personal care services allow for Family Care providers to receive additional training and funds to perform such tasks as preparation of special physician prescribed diets, supervision and assistance with eating, assistance with bathing and grooming, assistance with self administration of medication and assistance with incontinence. These services are identical to the personal care/home health care services provided by home health agencies in community settings.

This flexible residential service and the ability to individually tailor supervision of Family Care make the program a valuable asset to the Office of Mental Health community living spectrum. The 6½ year average length of stay in a Family Care home is testimony to the success of the program. As many chronically ill individuals are unable to follow the path to totally independent living, Family Care offers a cost effective, humane alternative to these individuals at various points along the way.

The New York State Office of Mental Health currently supports 2,375 Family Care residents. We expect to support 2,500 residents by June 1990, and an additional 100 the following year. Approximately 95 percent of all Family Care residents receive SSI funding defined by New York State as Level I. Program funds are available to support those without personal funds and not eligible for SSI. After their personal needs allowance are deducted, the Family Care provider receives the following portion of the payment: $545.96 downstate, $507.96 upstate.

When a Family Care program receives a referral for placement, the Patient Resource Agent at the program site proceeds with an evaluation process to determine if the resident meets financial criteria of the SSI program. If eligible, the agent prepares and files the application form. A Family Care staff member provides necessary medical information to support the application. If SSI is denied, the agent will determine if there is a sufficient reason to appeal the decision. This system assures that no one referred to Family Care and eligible for the payment will be denied this benefit.

Our Family Care providers are theoretically reimbursed for expenses incurred to maintain a resident, such as food, shelter, heat, laundry and necessities such as blankets, pillows, toothpaste. In practice, however, our providers are responsible for numerous care giving responsibilities. Following an extensive certification process which involves a personal screening and residential safety inspection, our providers must offer a home like, family like environment, resident involvement in family activities, and 24 hour supervised care. In addition, providers participate with program staff in the planning for psychiatric, medical and dental care. They must complete initial and on going training and are required to provide resident transportation to training programs, religious or recre-

ational activities, or medical appointments if needed. Given all that is required of providers, their monthly wage is quite meager.

Since July 1, 1986, the Federal portion of the Family Care SSI payment has increased by $32, while the New York State portion has increased by $5. This has resulted in a $19 increase for the provider and an $18 increase for the resident's personal needs allowance. The $19 provider increase represents a 3.8 percent addition in payment, while the consumer price index during the same period of time represents a 16.3 percent addition.

As the success of the Family Care provider home recruitment and retention efforts is closely tied to the current attractiveness of the SSI payment, it is critical that current provider payments be commensurate with the cost of living. This would require an immediate $80 increase by either the Federal or State share, or a combination of both. Continued neglect of the SSI payment levels will result in a serious erosion of the provider base, loss of subsequent homes, requiring that persons be maintained in a much more costly and less humane institutional settings.

Thank you.

Mr. DOWNEY. Thank you, Mr. Mendez?

STATEMENT OF EDWIN MENDEZ SANTIAGO

Mr. MENDEZ. Good morning—excuse me for my cold. I am Edwin Mendez Santiago, Executive Director of the Spanish Speaking Elderly Council, RAICES. RAICES or roots is an access and outreach program serving the Hispanic aged.

I appreciate the opportunity to testify before this joint committee, and would like to express my gratitude to Assemblyman Harenberg, Congressman Downey and Representatives Slaughter and Blaz, and the others present here for their interest in the needs of the SSI eligible elderly.

The question posed by this panel is, SSI Outreach: Is the Federal Government Doing Enough? The answer is an emphatic, No! There can be no doubt that the Federal outreach measures have failed to increase SSI enrollment. This reality can be attested to by various community based agencies and has been documented in various studies. The Villers Foundation, SSI Aware project, is one of the most recent studies of this issue. They estimate that nationally, less than half of those eligible are receiving SSI benefits.

In my opinion, SSI participation is limited by three primary obstacles. At one level, the Federal Government is not doing enough direct outreach. Additionally, what outreach is undertaken is done in an unplanned, temporary, dispersed and untargeted manner. Secondly, the outreach methods utilized by Federal agencies are bureaucratic and inefficient. The Social Security Administration continues to rely on outdated pamphlets and other traditional public information activities. These have been proven to be as ineffective as they are inexpensive. Finally, the application process is much too complex. This very negatively effects the participants ability to understand and apply for benefits. This also effects the ability of community based agencies and volunteers to also understand and assist participants with applications and appeal procedures.

My personal gut reaction is to assume that the current Federal system is purposely designed to limit SSI enrollment. A simplified application procedure will by itself improve access and increase participation rates.

Due to time constraints, I will concentrate my comments to concerns with the need for community based and culturally sensitive SSI outreach programs. As an AARP study has indicated, outreach efforts must be tailored to reflect the community and populations targeted.

RAICES serves as a model of an access and outreach program which has been able to reach and assist the Hispanic aged. The Hispanic aged community is among the poorest and most needy elderly populations within the State. A recent study by the Commonwealth Fund noted that a disproportionate number of elderly Hispanics face severe financial hardships and serious health problems. This same study notes that only 44 percent of SSI eligible Hispanics are currently receiving benefits.

Clearly then, current outreach practices are not effectively reaching the Hispanic aged. RAICES has been successful in increasing Hispanic access to services. This has been accomplished due to our grass roots and cultural orientation. RAICES utilizes an ethnic ramp approach to service delivery. Our trained bilingual, bicultural staff is able to bridge the gap between the Hispanic older person and service providers. RAICES staff creates linkages with Hispanic informal networks, churches, merchants and community groups. Through these linkages, we are able to identify seniors in need of assistance. Our Spanish speaking staff is able to talk to and culturally relate to the Hispanic senior citizens. We are able to create a relationship in which the clients feel comfortable and will allow us to assist them.

RAICES is sensitive to the need of Hispanic participants to relate in a personal, non-institutional manner, with agency personnel. The preference for personal relationships (personalismo) and trust (confianza) are culturally ingrained within the Hispanic elder. Without this relationship, the Hispanic elder may become intimidated and not seek assistance.

Unfortunately, many agencies operate under the premise that people in need will automatically seek assistance. Nothing can be further from the truth. Many seniors are unaware of SSI or that they may be eligible for benefits. Others may try to apply, but are unable to navigate this complex system. Therefore, to be successful, outreach programs must identify those in need and then assist them through the application process.

RAICES has been able to reach and assist the Hispanic aged by providing services within the inner city neighborhoods where they reside. These are often areas experiencing violence, crime and urban blight. Because of this, many agencies and workers shy away from assignments in these communities. By training and hiring community residents, RAICES is able to utilize staff who are working in neighborhoods they are familiar with. This factor is important in being able to accomplish grass roots and door to door outreach. You cannot identify or serve a senior who lives in the projects, without visiting public housing developments.

In conclusion, for SSI participation to increase, the application process must be simplified. Creative community based outreach services must also be utilized. To reach and assist the Hispanic aged, outreach programs must be culturally and linguistically sensitive, as well as operated by Hispanic community based agencies.

I would just like to add that, similar to the experience in Guam, the island of Puerto Rico, all Puerto Ricans are also American citizens, also doesn't have SSI benefits extended to the island.

Mr. DOWNEY. No, and when the committee did—last year when we wrote the Welfare Reform Bill, when we tried to increase the benefits to the islands, not only of Guam but the Samoan Islands and Puerto Rico, we ran into some fairly staunch resistance from those who didn't want that money applied.

Jack, let me start by congratulating you and the work of your staff on doing this survey. I am assuming, and I don't want to ask you a lot of questions about the sample size, but you are reasonably satisfied that the people you interviewed were representative of what is out there in the SSI population in Suffolk and Nassau?

Mr. O'CONNELL. Yes, this was the first time by the way—at your insistence a few years ago—we used to target most of our studies towards Nassau alone. We expanded this one to be Long Island wide to get a greater sense of what was happening in both populations. Although I am not a researcher, being a philosopher, the researchers that we used to back this up tell us that when you are dealing with a 24,000 base, that indeed if we were to interview 120 people at random, it would give us an effective sample of what we were trying to understand.

Mr. DOWNEY. Yes, that sounds about right. I am surprised by your finding that 72 percent of the individuals in your sample were or recently were eligible on SSI and that this is considerably higher than the national average. Why is that so, do you think?

Mr. O'CONNELL. I don't know, Kathleen would you want to give that a shot? 72 percent of all of those interviewed were eligible. One of the reasons that that would not reflect the national figures of 50 percent eligible or 50 percent eligible not receiving, is that when we do studies, we go to places where we encounter people receiving other services so we go to either a Department of Social Service or a soup kitchen. People who have a tendency to go to those places would be the same people ordinarily who be assertive or aggressive enough or knowledgeable enough to be applying for these services at other levels, so that is going to be skewed a little bit higher. What I found unusual was the amount of people who were in the sites and settings who didn't even know about SSI, but it does reflect a larger population.

Mr. DOWNEY. We, also in the reconciliation bill, have a provision that eliminates the automatic one-third reduction of benefits for living with someone else. I mean, we have an income test that we amend to it so that if you are living, for example, if you are living with Donald Trump which is probably not the case, you probably should have your benefits reduced, but if you are living with someone who is equally as poor, it probably makes some sense for us to determine that and allow you to keep a full level of benefit without having this one-third automatic reduction and we intend to do that. After having looked at this form, I can assure you that we will

spend a little bit more time seeing if we can't simplify it somehow. I mean, it really makes anything the Internal Revenue Service does, equally as complex, but I didn't think they were as bad as they are. I have seen some of the AFDC forms, they are pretty horrendous too.

[See appendix, p. 69 for sample form referred to by the Chairman.]

Mr. O'CONNELL. I don't know if you are aware but the food stamp application is very similar to the SSI application—

Mr. DOWNEY. Yes.

Mr. O'CONNELL. [continuing] with simply a couple of more questions and one of the things that we have been told by advocates as well as bureaucrats in the Social Service system is that since they are both Federal programs at a certain level that if indeed there could be a coupling of the application process, it would eliminate a lot of the constraints. One of the things we found is that less than 60 percent of the people that we interviewed on SSI were receiving food stamps. Food stamps we found to be an incredible nutritional assistance and if that could be coupled together would be very helpful.

Mr. DOWNEY. Well, we asked last year as well to try and make sure that the AFDC and the food stamp applications are similar so we could have maybe just one application basically for all three with a few exceptions, but I am afraid the more we asked various agencies to coordinate and do that together, the more likely we are to have an application that is even longer and more difficult. Paul?

Mr. HARENBERG. Yes, he knows government very well. You gave us some really excellent statistics on who the SSI recipients are, they are really going to help us a lot I think in identifying who our potential target are. Can you give us any other information where you think we ought to target—who are the people that are missing among the recipients. You know, when you give us the numbers of those who are on SSI, you can probably identify that good many people who are quite like them are also not yet signed up. Do you think there are other people who are not on SSI who do not fall into any of the groups that your statistics were talking about?

Mr. O'CONNELL. Who are not on SSI?

Mr. HARENBERG. Yes. Is there any whole segment of the society that we are totally missing, that we are totally missing, they are just not reaching?

Mr. O'CONNELL. Kathleen, you are good at this.

Ms. KELLY. I think that some statistics that we received from our study and studies that the AARP has done nationally point out that elderly people living alone, that the AARP and national statistics for New York State, 47 percent or close to 47 percent of the people who are eligible for SSI are not receiving it who are elderly. There are a whole group of people there. I think that the whole children's disability issue is something that really needs to be taken a hard look at. It was very difficult in Long Island, in Nassau and Suffolk Counties to even assess children because of confidentiality issues to even get in there. Our study didn't even come close—we touched on a few but really didn't even include them in the study. The whole disabled population, the working with the population for the most part is connected with some serv-

ices. There haven't been too many studies that I am aware of but I am sure, in my past experience working with people who are mentally ill, there is a whole other category of people who need to be identified.

Mr. HARENBERG. Who have not been in institutions you are talking about?

Ms. KELLY. Absolutely, there is a whole new idea that—

Mr. HARENBERG. If a person is being discharged, they are probably going to get signed up on SSI.

Ms. KELLY. I am sure that Linsley will point out there is a whole group of young chronic mentally ill people who aren't even identified right now—

Ms. PIPER. Yes.

Ms. KELLY. [continuing] and of course with the drug situation how it is, there is going to be whole new category of people, it is a mess.

Ms. PIPER. And that is coupled with the homeless, the mentally ill homeless. It is a tremendous issue that I couldn't even begin to speak to today.

Mr. MENDEZ. Our experience has been similar with their study in terms of elderly women living alone, particularly elderly Hispanic women which are over 80 percent are below the poverty line. When we find an elderly Hispanic woman living alone, we also see that they tend to be the ones that are most isolated, who are not bilingual, who don't know how to navigate Social Services, even some of the simpler ones, and who are probably not getting SSI although they are eligible for it. They may have tried one time in the past, we have a similar experience, that they may have tried and were denied, and never appealed. They didn't know or didn't understand that they could appeal or didn't have anyone who was able to assist them at that time and in our doing outreach, very grassroots, going door to door, talking to people and their churches, their local merchants, at the street level, we find a number of folks that when we say to them SSI, their first reaction is, "Oh, I applied three years ago and was denied", but they never thought to either appeal or that they could reapply after that.

Mr. HARENBERG. Your approach is one that certainly has to be a part of the whole outreach effort. There has to be a mix of government and groups that have the contact at the grass roots level as you pointed out and have the bilingual and bicultural approach that your organization is using. Everything that we do both Federal and the State level in outreach is going to have to combine those kinds of efforts.

Mr. MENDEZ. I think the example from the county that Mr. Halpin just gave, I think is something that should be looked at. Andy Koski and I who drove up together were discussing this in the morning in the car and that it seems so simple to think that the government agencies and Social Security, knows who they have on the roles that have income levels that are very low and that why couldn't those mailing lists be used to target, to try and educate about SSI and part of that targeting could include for example those options so that once getting those mailings, people can be instructed that if you need assistance in Spanish, you have these groups like you have here in your county, that you can go to, or

you can come to us as a government and give people those options. And, it seems somehow so simple that it can't be done, that those mailing lists aren't utilized more often to try and educate people and direct them to community based as well as governmental based outreach programs.

Mr. HARENBERG. Jack you gave us, I don't remember what the percentage was, but a large number of people who don't have Social Security at all.

Mr. O'CONNELL. Forty percent.

Mr. HARENBERG. That was really a startling finding.

Mr. O'CONNELL. You know, it hooks into your previous question. When Kathleen first reported this to me I said why is this happening and her first remark was these people have never been in the workforce. If you have been in the workforce, you would be automatically eligible for Social Security. That feeds right into the statistic which was also a little bit shocking that 66 percent of the people were declared eligible because they were disabled, prior to being elderly so there is a whole bunch of things they fit in here, but it is the disability aspect that seems to flow through the whole process and the isolation piece.

Mr. MENDEZ. In our community, it is somewhat different. People may have been in the workforce, they just weren't there legally, they weren't on the books, and we have that—I don't have a percentage to give you but it seems to be a high number of those clients that we reach that have worked all of their lives but weren't on the books and when they retire have no Social Security, and then have difficulties explaining when they go for this very complex interview with SSI where their income was from.

Mr. HARENBERG. Could they also be very advanced for elderly people who might have worked before SSI existed but didn't afterwards raise the family, married, and in those days some women didn't go to work?

Mr. O'CONNELL. My guess is that it is unlikely, not based on this study but on the previous studies. One of the things that we came up with a few years ago was that 55 percent of Long Island women who are widowed have no pension period. So, what we see is that there is a limited resource. I wouldn't know the incidence of people who worked prior to Social Security but I think that is diminishing at this point.

Mr. MENDEZ. Just one other comment I had that Representative Slaughter made before about the bilingual capacity of Monroe County. That is also an issue at local Social Security offices. In Brooklyn, for example, I just had my staff go and visit three of the most busy offices around and found that one of them in East New York, which is a very—a community that has a high percentage of Hispanic residents—they have a very low number. I can't quote to you right now the figures, and it creates another disincentive because if you get someone to the office and there are only one or two bilingual persons on staff, they may be so tied up or there may not even be a sign that the clients that need Spanish, that people are left to wait for this one worker and because of the other dehumanizing aspects of applying for SSI simply don't apply. The other issue in terms of the one-third, what we found is that that is another dehumanizing aspect because seniors in many times find that

if they stay with their family they receive less money. There is no incentive for families to stay together and help each other and that many workers at a community level end up counselling their clients. If you can find low rent apartments which is also another issue in our area, it is better for you to live apart which is crazy. We are actually telling families who want to stay together that if they separate they are going to get more dollars and more benefits. It shouldn't be like that, there should be an incentive to allow families to stay together and care for each other.

Ms. SLAUGHTER. I have more of a comment than anything. Tom, it always seems doubly tragic to me that these problems, the inefficiency of systems, seem to fall most heavily on women who are alone, either culturally or educationally unable to cope. Mr. Mendez, I noticed that RAICES is funded by the New York State Department of the Aged. Are you limited to dealing with the elderly—are you able to reach out to that portion of the Hispanic population which does not fall into that category?

Mr. MENDEZ. We do that as part of our outreach just because of cultural patterns. We realize that at times to get to the elderly, we have to work with the family. Although as the 1980 Census does show, the myth of the extended Hispanic family is a myth and over 20 to 25 percent, depending on which data you look at of Hispanic elderly, do live alone now. But, we are a service that is targeted for serving the Hispanic aged. Now, how we reach the aged is left to our own creativity but our services are meant for the Hispanic aged. However, if we do in our outreach encounter a disabled person or someone else, we end up always assisting as much as we can to get them their benefits. But, our expertise and our target are the Hispanic aged.

Ms. SLAUGHTER. I would like to say just a bit about outreach of my own. In 1987 when the Older Americans Act was extended, my constituents in Livingston County, an upstate county, alerted me to a problem with the food stamp program. Consequently, we were able to get included in the bill a provision that allows the elderly who are on food stamps to work and make a little bit of extra money without jeopardizing those food stamps. I am confident that this allowance is also something that is not well known and necessitates greater outreach. But for all those who are eligible for food stamps, I want to assure you that this is part of the law now. I agree with you absolutely Mr. O'Connell, that there is no reason in the world why people who are on SSI should not have food stamp eligibility at the same time.

Mr. DOWNEY. Louise, if you would yield for a second to Jack. Many of the people you found on SSI were not receiving food stamps?

Mr. O'CONNELL. Fifty-seven percent were, that means that 43 percent weren't.

Mr. DOWNEY. Aren't they automatically eligible?

Mr. O'CONNELL. They should be. There are two different entry points. SSI you enter through the Social Security Administration, food stamps you enter through the Department of Social Services.

Mr. DOWNEY. If you qualify for one you qualify for the other.

Mr. O'CONNELL. You qualify but it doesn't necessarily mean you apply.

Mr. DOWNEY. How many of them receive, how many SSI recipients—they all receive Medicaid as a result of their—

Mr. O'CONNELL. You get a Medicaid card.

Mr. DOWNEY. [continuing] you get a Medicaid card, do they all have it?

Mr. O'CONNELL. Do you know?

Ms. KELLY. They may not necessarily have it—it's automatic—go ahead.

Mr. MENDEZ. The problem—it is automatic. The problem may be a time that the client doesn't understand the Medicaid and where it comes from, and if at one point their SSI is placed in jeopardy which often it is for some minor reason—I mean, if SSI finds out and people will volunteer innocently information that they shouldn't, "my daughter gave me $200, it was my birthday", that at times may end up becoming reason enough for someone to say, "well, we are going to have to lower your benefit because that is in kind assistance and we assume if she gave it to you once, you are getting it all the time", and many people end up losing their SSI which means they lose their Medicaid and then to get them back on becomes a real bureaucratic process so the problem is understanding. One of the things in your introduction today and in the other speakers that I believe in and I am glad to hear is the sense of advocacy. Advocacy not only in the sense of changing policy, but advocacy in the sense of helping the client. The clients will not be able to get their benefits unless there is someone who is out there saying "wait a minute". And it is interesting to find that groups like Brookdale and what happens in the county here, is that when you do take the appeals and document it, they are winning over 90 percent which shows us that the people are being in many ways dehumanized and mistreated are groundless and again one of the things that we do in doing outreach, if I am holding a meeting in a community or a church setting, I always try and do a Census right there and it is not surprising to us to find folks that are not getting SSI that are eligible, or food stamps, but even issues with Social Security and Social Security survivors benefits for the women. They just simply did not know or have made an attempt that was not positive and never went back.

Mr. DOWNEY. Well, I'm convinced if we made a bonus to Social Security workers for every new SSI recipient, we would have a whole host of people who are currently not now eligible would be eligible. Louise, were you finished?

Ms. SLAUGHTER. I'm finished, thank you.

Mr. DOWNEY. Ben?

Mr. BLAZ. You know Tom, the more I listen here the more I think your island is a lot more complicated than my island.

Mr. DOWNEY. It's a little bigger Ben.

Mr. BLAZ. Let me ask a couple of questions please. You made a statement Mr. Santiago that—was it Santiago?

Mr. DOWNEY. Mendez.

Mr. BLAZ. Mr. Mendez. You feel that the forms were designed to discourage people from applying for SSI. I would not grant the Federal Government such genius. I think what is more likely is that we have another case of the Federal Government's throwing forms together to meet particular ends without looking at the overall pic-

ture—jury-rigged situation if you will. I grant you the overall effect is the same, but the intelligence behind it is more limited. Though, looking over the form that Tom has—I haven't seen it before—I must confess Mr. Mendez may have a point. Forms aside, there seem to be even more potential fundamental flaws in the program that need our further consideration. If there is a shortage of funds available for eligible recipients, would it affect the outreach efforts? Would there be less to share, if more people knew about and took advantage of SSI. I was also struck by the disparity in the percentages of eligible recipients reached by the different agencies. Ms. Piper, 95 percent of your people are aware, and, Mr. Mendez, in your program, 44 percent which is less than the national average. Is it possible that because the system is so complicated and bureaucratic and frustrating that there is a sense of just giving up on the part of all concerned?

Mr. MENDEZ. You know, one of the concerns that I had listening this morning from a client advocate point of view was during the 1980s and the Reagan administration, clearly the pressure from the Federal Government was to kick people off the SSI roles and that those people would then be served at local government levels. Now we hear of government at a local level realizing that if we get people back on SSI, that it relieves our burden and clearly that should be a Federal mandate. My concern was looking at it from the clients' point of view and saying I hope the client isn't caught in the middle between the Federal Government pushing them off and the local government pushing them off of their roles, and that the clients not suffer, so that we have to find ways to guarantee that the clients are served and they are served by those programs that exist to benefit people, and SSI is one of those. And there are things that we can do, as many of the testimonies have addressed not only in terms of outreach but in terms of improving the application process and some of the other issues in regards to resources and other disincentives—there are many people who are eligible by income but may not be because of their resources and simply raising the resources will make them eligible, so we have to look at ways to make sure that our benefits are reaching those who are needy, because we are not talking again about people who are living in the lap of luxury. We are talking about really needy folks who for one reason or another are being excluded from this benefit.

Mr. BLAZ. May I ask one more question Tom?

Mr. DOWNEY. Sure.

Mr. BLAZ. It seems to me that we are using a tremendous amount of the program's funds just to administer it. That's all money that's in the program, but not going to those the program is designed to help. Isn't there some way we can simplify the administration? This policing system, for instance, is so time consuming and personnel consuming in the sense that it demands so many people to do what should be an essentially simple job. It's like a city having two policemen for each civilian. No city could afford that. But that's what we seem to have here—two bureaucrats overseeing each of the eligible poor in the program. Am I out of whack here?

Mr. O'CONNELL. No, let me respond to that. It seems that over the past few decades that the emphasis of the public sector has

been not on providing service but on checking eligibility and default levels. I can bring to your attention that the New York State Department of Social Service has a food stamp bureau which, by the way, food stamps are federally funded. They have nine staff members that do programs. They have 127 people that do audits. What we have become is in the provision of the public service, and local Departments of Social Service are as great errors in this as would be the Social Security Administration, is that workers see themselves as declaring people ineligible and therefore saving government money—not in providing service. We have switched in our emphasis and when we look at what our funding patterns are, it would even disturb you more to know that there is 10 and 20 times more dollars going on auditing programs than there are in actually delivering the service.

Mr. BLAZ. I wish you hadn't told me that. Thank you Mr. Chairman.

Mr. DOWNEY. You're welcome. It was a good question Ben and I might add that again in this Reconciliation Act, we have changed the error rate. In the past, you weren't penalized if people who weren't eligible were kept ineligible, you were only penalized if you made people eligible who aren't eligible. So, now, we are trying to say, okay, what is good for the goose is also good for the gander here. I mean, if you are keeping people who aren't eligible off the roles, we are going to try to make sure that there is a penalty there as well. But it is a very complicated thing and there is kind of a long arm about automatic eligibility. If we just make people automatically eligible and there isn't something more to it, counselling or help, then we maybe missing the responsibility that we had. I mean, we have gone through this discussion whether we should have a case work program or just an income maintenance program, and I am convinced that we have to have a simple eligibility form and a case work and the rich advocacy that we see here today.

Jack, Linsley and Ed, thank you very much.

The last panel, Andrew Koski is the Public Policy Coordinator of the Institute on Law and Rights of Older Adults, at the very fine Brookdale Center on Aging of Hunter College. Andrew, thank you for finding your way out here today. And Lou Krieger who is a member of the National Legislative Council of AARP. Lou while you are walking up, let me tell you that tomorrow is probably the last day in the House of Representatives for you to have to go out and explain the catastrophic health insurance. Some will say hooray, and hopefully it will be replaced with something better, but I want the record to reflect that Lou spent many unhappy hours in the Second District trying to explain this classic program. At some personal risk to himself I must add.

Mr. KRIEGER. No, I have a bullet proof vest.

Mr. DOWNEY. Yes, much needed. Mr. Koski, you are first.

Mr. KOSKI. Okay, thank you.

PANEL THREE, CONSISTING OF ANDREW KOSKI, PUBLIC POLICY COORDINATOR, INSTITUTE ON LAW AND RIGHTS OF OLDER ADULTS, BROOKDALE CENTER ON AGING OF HUNTER COLLEGE, NEW YORK, AND LOU KRIEGER, MEMBER, NATIONAL LEGISLATIVE COUNCIL, AARP

STATEMENT OF ANDREW KOSKI

Mr. KOSKI. Good morning, Congressman Downey, Senator Harenberg and other Members of Congress. My name is Andrew Koski. I am Public Policy Coordinator of the Institute of Law and Rights of Older Adults. Most of what I had planned to talk about will be covered by earlier people so I will try to concentrate on some other points.

Mr. DOWNEY. Andrew without objection, both you and Lou's statements will be put in the record and if you want, if you would prefer more conversational. If you want to read it that's fine, but if you just want to tell us in your own words, that is okay.

Mr. KOSKI. Let me just first step out to thank Congressman Downey for holding today's hearing and also for all of your past efforts on improving the SSI program on a Federal level and I am just as happy to thank Assemblyman Paul Harenberg who has been the number one ally for advocates on SSI at the State level. Keep up the great work.

Other witnesses have testified on ways to really conduct outreach and change some of the rules of the SSI program. I think that just as integral to the success of outreach is a renewed commitment to not only improve the program, it would also simplify the program and this commitment should include efforts to increase benefit levels. I think Jack spoke about the need to raise benefit levels up to at least the poverty level, and we have all really made that a priority. Also increasing the asset levels so that people's whose income is under the SSI level but whose resources might be a little bit too high can then become eligible.

One major problem involves overly restrictive regulations that discourage people from applying for SSI and that discourage recipients from remaining on the program. The current treatment of in kind assistance results in questions being asked about food, clothing and shelter assistance from family members and friends. Many people consider these to be private matters and so chose not to apply. Those who on receipt of such in kind assistance find that their benefits are reduced up to $142 each month and as Ed Mendez pointed out, this really discourages families from helping their loved ones who must live on SSI. Related to the concept of in kind assistance is a rule that if an SSI recipient lives with somebody else and receives both food and shelter, then they face a reduction of one-third in their Federal benefit. I know that Congressman Downey recognized that as a problem and has taken some action in this session on that.

The most favorable way to address this inequity is to disregard in kind assistance as income. Currently the law requires that in kind assistance given by a nonprofit organization to a needy SSI recipient is not counted as income and it is hard to justify dissimilar treatment of in kind assistance contributed by families or friends.

There are a lot of rules in the SSI program that either discourage people from applying or once they are on the program give them a hard time and result in them being frustrated with the program and I will give you one example. Interest that is credited quarterly is excluded if it does not go above $20 in a quarter. The person has a savings bank account and they get interest on a quarterly basis—if it exceeds $20 in a quarter it counts as income, and with the resource level now being $2,000, anybody who has more than about $1,650 in a bank account gets interest of more than $20 in a quarter. And, what happens is that when the go down to recertification, Social Security catches that and tells them they have been overpaid benefits and they have to pay it back and this results in an overpayment and really makes people very confused and angry about the program because on the one hand I am being told I can have $2,000 in the bank, but if I do, then I am penalized in another way. This is just one simple rule that could be changed that would again I think change the attitude that people get about the program.

Over the last few years, the key role of the district offices in administering the SSI program as it sharply curtailed and people have been discouraged from using their services. The phone numbers of local offices are not publicized, and are, in fact, hidden from recipients and from those professional advocating on their behalf. If you want information from Social Security, you are referred to a toll free number which may be good for some people, but it cannot help a person who has a particular question about their case—why was I cut off, why were my benefits reduced by $20. These are the people who have to know who they can call at their local office and we find that only by contacting a local office can you find out who is working on your case and see that some action is taken to correct that. One simple way again is that people should know if they get a notice from Social Security, the name of the worker who made the decision and the phone number. It is done with Medicaid, it is done with public assistance. There is no reason why it can't be done with Social Security.

We feel it is time to place a renewed emphasis on the vital role of the district offices. They need increased staff so that they can truly reach out to potentially eligible recipients within their own offices and within their communities and so they can provide individual assistance to combat people's ignorance and frustrations with the program.

The district offices also should be given the authority to inform potential recipients of their options, such as to set aside $1,500 in a burial fund. The way the law currently or the regulations are written, is if you go down to Social Security and you have excess resources, they will say to you is any of this considered for burial purposes and if you say, "no", they say, "fine, you are over resourced, come back when you are under the level." If you say, "yes", they will say, "fine, you can set aside $1,500 in a burial fund." A very easy suggestion is that people be aware of their options. Whether it is the option to set up a burial fund or the option to spend down the money on themselves and then come back and apply for SSI.

Lastly, the application process must be simplified. As Congressman Downey pointed out, the 15 page form is much too long for people and makes them very nervous and given lots of questions.

We understand that Social Security is revising the present form and we applaud this effort. But we also suggest that SSA develop a one page form that would describe the program, include a section that would enable individuals to indicate their interest in filing, and a provide a list of community resources that one might contact for assistance. These forms could then be distributed to community agencies and medical providers and would allow people to start the application process in a more timely and simple way.

SSA materials need to be rewritten at a level that can be understood by the general SSI population, and in a manner that does not stigmatize program participation.

Furthermore, SSA should abide by their own regulations and assist people who need help in obtaining documents to establish their eligibility. It is at this stage that many people either become discouraged from applying or apply unsuccessfully though they, in fact, qualify for benefits. If staff at Social Security helped them obtain the necessary documentation, these needy individuals would receive benefits to which they are entitled and SSA would avoid spending time on processing new applications at a later date.

Successful outreach involves far more than just publicizing SSI. It includes changing the internal administration of the program, raising the current income and asset levels, and removing overly restrictive regulations. Otherwise, the message will continue to be "SSI benefits do exist, but less for the deserving than for the persistent."

Thank you for the opportunity to present our views.

[The prepared statement Mr. Koski follows:]

TESTIMONY OF ANDREW KOSKI
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AT THE

JOINT FIELD HEARING OF THE HOUSE SELECT COMMITTEE ON AGING
SUBCOMMITTEE ON
HUMAN SERVICES
CHAIRMAN THOMAS J. DOWNEY

AND THE

NEW YORK STATE ASSEMBLY STANDING COMMITTEE
ON AGING
CHAIRMAN PAUL HARENBERG

SUPPLEMENTAL SECURITY INCOME OUTREACH: IS THE FEDERAL GOVERNMENT DOING ENOUGH?

Monday, October 2, 1989

Good morning, Congressman Downey, Assemblyman Harenberg and other members of Congress and the State Legislature. My name is Andrew Koski. I am Public Policy Coordinator of the Institute on Law and Rights of Older Adults, part of the Brookdale Center on Aging of Hunter College. The Law Institute researches the laws and regulations pertaining to entitlements such as Medicare, Medicaid, and Supplemental Security Income (S.S.I.), and provides publications that explain these programs for agencies serving the elderly. We also conduct seminars on public benefits both for service providers and seniors, and we represent individuals who wish to appeal denials, terminations or reductions in benefits (including S.S.I.).

On behalf of the Brookdale Center on Aging of Hunter College, I want to express my gratitude to Congressman Downey and Assemblyman Harenberg for holding today's hearing. Even though S.S.I. payments fail to bring recipients up to the poverty level, they constitute an important benefit for elderly and disabled people with low income and few assets. Numerous studies have concluded that only about one half of those eligible for S.S.I. are actually receiving benefits. It is therefore timely to ask, "Is the Federal Government doing enough outreach?" Unfortunately, the answer is no.

Other witnesses will testify today on ways that the Social Security Administration (SSA) can, on its own and together with community agencies, publicize the S.S.I. program. Such efforts are important and will help to increase the participation rate. However, just as integral to the success of outreach is a renewed commitment by SSA to improve and simplify the S.S.I. program. Only in this way will

SSA be able to replace its current reputation as an agency intent on exluding people from S.S.I. benefits, with a more humane image of encouraging people to apply for S.S.I. and to remain in the program as long as they need it.

This commitment includes supporting efforts to:

1) increase the S.S.I. benefit levels;
2) increase the asset levels;
3) change unduly restrictive regulations such as the treatment of "in-kind" assistance and bank interest, which penalize beneficiaries and use up much of SSA's staff time;
4) restore the essential role of the district offices in providing valuable service to S.S.I. beneficiaries; and
5) make the application process easier.

Two major improvements which will restore the program's goals of helping people with low income meet their need for food, clothing and shelter are: 1) to raise benefits at least up to the poverty level and; 2) to increase the asset limits. Only three states contribute sufficient funds which coupled with Federal benefits bring SSI recipients up to the poverty level. Recipients in other states often have to choose between purchasing food or other necessities because their benefits are inadequate.

Over the past 15 years, the amount of assets allowed under S.S.I. (individuals - $2,000, couples $3,000) has been increased by only $500 for individuals and $1,000 for couples. The minimal levels restrict recipients' ability to rely upon their savings for economic

support. They also render ineligible those individuals who have low incomes but who also have savings just above the asset levels. We support a modest change to raise the resource limit to the level it would be if it kept pace with inflation.

Another problem involves overly restrictive regulations that discourage people from applying for S.S.I. and that discourage recipients from remaining on the program. The current treatment of in-kind assistance results in questions being asked about food, clothing and shelter assistance from family members and friends. Many people consider these to be private matters and so choose not to apply for S.S.I. Those who are in receipt of such in-kind assistance find that their benefits are reduced up to $142 each month. This rule discourages families from helping their loved ones who must live on S.S.I. benefits. It runs counter to government efforts to assist families and strengthen their bonds.

Related to the concept of in-kind assistance is the rule that if S.S.I. recipients live with someone else and receive both food and shelter assistance, they face a reduction of one-third ($142 per month) in their Federal S.S.I. benefits. This penalizes families who choose to live with disabled children or their elders and to provide them with support.

The most favorable way to address this inequity is to <u>disregard in-kind assistance as income.</u> Currently the law requires that in-kind assistance given by a non-profit organization to a "needy" S.S.I. recipient not be considered as income. It is hard to justify dissimilar treatment of in-kind assistance contributed by families or friends. If such a proposal is too costly, then a helpful reform

would be to decrease the reduction of Federal S.S.I. benefits from one-third to one-sixth so that the maximum reduction would be $81 per month.

Another inequity in the S.S.I. program is the treatment of interest on savings. Interest credited quarterly is excluded if it does not exceed $20. This is a problem because beneficiaries who have more than $1,600 in savings but less than the maximum allowed ($2,000) earn interest in excess of $20. The result is recipients are charged with having received an overpayment even though their savings are within the limits. Such "violations" result in anger and confusion among the beneficiaries affected.

These overly restrictive rules reduce the amount of S.S.I. benefits and place harsh reporting requirements on a population unable to comprehend such matters. Furthermore, SSA workers must spend an inordinate amount of time implementing and monitoring these complicated regulations.

Over the last few years the key role of the district offices in administering the S.S.I. program has been sharply curtailed and people have been discouraged from using their services. The phone numbers of local offices are not publicized and are in fact hidden from recipients and from those professionals advocating on their behalf. While the toll-free teleservice centers may help people with simple questions, they cannot provide information on why a particular beneficiary's payments have been reduced or terminated, nor can they explain the contents of correspondence sent by the local office. Only by contacting the district office can a person obtain such information

and see that action is taken to correct an error. We have found this to be an invaluable service to recipients and one that prevents lengthy and costly appeals.

It is time to place a renewed emphasis on the vital role of the district offices. They need increased staff so that they can truly reach out to potentially eligible recipients within their own offices and within their communities and so they can provide individual assistance to combat peoples' ignorance and frustrations with the S.S.I program. SSA must remove such barriers to enrollment as the present lack of bilingual workers and lack of staff sensitivity to the needs and backgrounds of the population they serve. Additional minor changes are called for, such as having SSA workers sign their names and include their phone numbers on all notices they send to applicants and beneficiaries.

The district offices should be given the authority to inform potential recipients of their options, such as to set aside $1,500 for a burial fund and to spend down their resources. Such instructions are a necessary part of any campaign to give S.S.I. benefits to needy individuals.

Lastly, the application process must be simplified. Social workers and other advocates should be allowed to help people complete applications for S.S.I. This would relieve their clients' anxieties about the program and reduce the time that SSA workers must devote to this task.

We understand that SSA is revising the present 15-page application form and we applaud this effort. But we would also

suggest that SSA develop a one-page form that would: a) describe S.S.I.; b) include a section that would enable individuals to indicate their interest in filing for S.S.I.; and c) provide a list of community resources that one might contact for assistance. These forms could be distributed to community agencies and medical providers and would allow people to start the application process in a more timely and simple way.

SSA materials need to be rewritten at a level that can be understood by the general S.S.I. population and in a manner that does not stigmatize program participation. Information should be available in large print and on tape for visually impaired people.

Furthermore, SSA should abide by their own regulations and assist people who need help in obtaining documents to establish their eligibility. It is at this stage that many people either become discouraged from applying or apply unsuccessfully though they in fact qualify for S.S.I. benefits. If SSA staff helped them obtain the necessary documentation, needy individuals would receive benefits to which they are entitled and SSA would avoid spending time on processing new applications at a later date.

Successful outreach involves far more than publicizing S.S.I. It includes changing the internal administration of the program, raising the current income and asset levels, and removing overly restrictive regulations. Otherwise the message will continue to be "S.S.I. benefits do exist... but less for the deserving than for the persistent."

Thank you for this opportunity to present our views.

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Mr. DOWNEY. Lou?

STATEMENT OF LOU KRIEGER

Mr. KRIEGER. Thank you, Representative Downey, Slaughter, Blaz and Assemblyman Harenberg for the opportunity to testify. Since you requested that we avoid some of the repetition that previous witnesses have given so ably, I would like to talk about one outstanding accomplishment of AARP in this field, and that is that we undertaken a model outreach program in 13 cities and in 1990 we have plans for 20 more outreach programs.

We would like to commend you, Representative Downey, for your active leadership in securing SSI improvements at the Federal level and as a result of your commitment to the program, the House Ways and Means Committee included SSI improvements and an expanded SSI outreach program in its reconciliation legislation. Therefore, I would like to go directly to our outreach programs that we conducted in 1988 and in 1989.

AARP responding to the low participation rate among the elderly and the absence of sustained SSA outreach, began its own program in 1988. A pilot project funded by the Commonwealth Fund Commission on Elderly People Living Alone was undertaken in Pittsburgh, Oklahoma City and El Paso. It tested outreach methods at the local level.

Statistics provided by SSA show that in these three cities, the SSI application rate increased by 97 percent, and the SSI award rate increased by 58 percent.

In 1989, our outreach program was expanded to 10 cities. Because of the success of our pilot project, the Association received 80 applications for organizations that want to operate with us in the 10 sites.

This spring, in 1989, outreach programs took place in Asheville, North Carolina; San Antonio, Texas; Rutland, Vermont; Sacramento, California; and Lac Du Flambaeu, Wisconsin. As of interest, in San Antonio, Texas, there was an increase of 60 percent in applications and 54 percent in award rates.

Preliminary results from these sites show that during the months of May, June and July, applications as a whole increased by 38 percent and award rose by 37 percent. The remaining five sites in 1989, Portland, Oregon; Denver, Colorado; Des Moines, Iowa; Winter Park, Florida; and East Orange, New Jersey are starting this fall.

The key to the success of the AARP outreach program is the use of coalitions of local organizations. This approach allows active involvement of local citizens and organizations committed to helping low income people in their community.

AARP provides technical assistance, training, material, videotapes and some publicity. The local agency assumes a leadership role in the building and guiding of a coalition of local agencies. Local cosponsorship also entails a financial commitment. Unfortunately, this fiscal requirement precluded some otherwise interested local groups from participating in our outreach program.

AARP hopes to continue expanding the outreach program in several ways. First, we are developing a "How To" manual and a vid-

eotape which will provide interested communities with options for establishing their own outreach program. AARP would be available to provide some technical assistance.

In addition, we are expanding our activities as I mentioned to 20 new sites in 1990. These outreach efforts will include other public benefits as well, meaning food stamps and Medicaid.

AARP's SSI outreach program has been successful, but, by nature, is limited. It cannot replace a national effort coordinated by the SSA and implemented by the local level. Local communities and organizations cannot be expected to reach the large number of potential eligible participants nationwide.

AARP is encouraged by the commitment of the new SS Commissioner to expand SSI outreach. Successful SSA outreach activities would not only help potential SSI recipients, but they also would help alleviate the burden on local governments who now provide assistance to low-income, elderly, blind and disabled who are not receiving SSI.

In summary, you might say coalitions, outreach technique, minority population and profit targeting, SSA involvement and then we don't consider this just a one shot deal. This has to go on ad infinitum in the future, because outreach will always be necessary.

Thank you.

[The prepared statement of Mr. Krieger follows:]

AARP

STATEMENT

of the

AMERICAN ASSOCIATION OF RETIRED PERSONS

before the

SUBCOMMITTEE ON HUMAN SERVICES

of the

SELECT COMMITTEE ON AGING

UNITED STATES HOUSE OF REPRESENTATIVES

and the

STANDING COMMITTEE ON AGING

NEW YORK STATE ASSEMBLY

October 2, 1989

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The American Association of Retired Persons (AARP) appreciates the opportunity to testify on the adequacy of federal efforts to expand participation in the Supplemental Security Income (SSI) program. The Association has made SSI outreach a legislative priority and has also undertaken a model outreach program in thirteen cities.

AARP commends Representative Downey for his active leadership in securing SSI improvements at the federal level. As a result of his commitment to the program, the House Ways and Means Committee included SSI improvements and an expanded SSI outreach program in HR 3150, its reconciliation legislation.

I Outreach by others

The SSI program consolidated existing state administered public assistance programs into a single, federally run entity in 1974. When the program began, the Social Security Administration (SSA) estimated that 6 million persons (of whom 4 million were 65 and over) would be eligible to apply. Despite SSA's outreach efforts, by January 1974, only 3.2 million people (of whom 2.0 million were 65 and over) were receiving SSI. Largely as a result of continued SSA outreach, SSI enrollment reached its highest level of 4.4 million participants in 1975. By 1983, the number of SSI

participants had seriously eroded to 3.9 million.

Concerned about the 33 percent decline in the enrollment of aged SSI beneficiaries (from 2.3 million in 1975 to 1.2 million in 1983), Congress required SSA to conduct two separate outreach programs for aged persons. Between February and July 1984, SSA mailed a one-time alert to 7.6 million Social Security beneficiaries whose benefits were low enough to indicate possible SSI eligibility. This effort resulted in 58,000 new SSI awards (0.7% of mailed notices).

The second approach mandated SSA to continually mail notices to Social Security beneficiaries who are about to attain 65 years of age and to beneficiaries who have received disability insurance benefits for 21 consecutive months. Both approaches are commendable, but are limited in effectiveness because they only reach those who are currently receiving Social Security benefits, literate, and able on their own to take appropriate action. It would appear that SSA lacks a formal mechanism to notify persons of their eligibility when they file for Social Security benefits for the first time.

Recognizing that SSA efforts are inadequate, studies were conducted by AARP, The Villers Foundation (Families USA Foundation) and the US Conference of Mayors to determine the extent of participation and the factors influencing it. Each organization reported that

lack of information is the major reason for non-participation in the SSI program.

Some organizations have responded to low SSI participation by conducting their own outreach, independent of SSA. For example, successful outreach activities were undertaken in Seattle, Washington in 1985 and 1986 under the leadership of the Older Women's League and the local area agency on aging. The Families USA Foundation focused their outreach activities on specific minority communities in Boston in 1988.

Despite these well intentioned and highly concentrated outreach efforts, many potentially eligible persons throughout the nation are not receiving the SSI benefits to which they are entitled. Today about half of those 65 and over who are eligible for SSI do not participate in the program because they do not know of its existence or because they are misinformed about it.

The time for renewed federal action is here. Expanded outreach must not solely be the responsibility of private groups and local governments alone. The Social Security Administration, the agency administering SSI, should be doing more outreach.

II AARP's Outreach Efforts

AARP has been involved in outreach projects in 13 communities.

In the first phase, a three-city pilot project, funded in part by the Commonwealth Fund Commission On Elderly People Living Alone, was undertaken to evaluate outreach activities on the local level. The three cities participating in 1988 were Pittsburgh, Pennsylvania; Oklahoma City, Oklahoma; and El Paso, Texas. In each location, a coalition of agencies assisted in the outreach efforts.

Statistics provided by SSA show that, in these three cities, overall SSI applications and awards increased dramatically in 1988. The application rate increased by 97 percent and awards increased by 58 percent as compared to the average of the three previous years.

Based on the success of the 1988 pilot project, AARP expanded the outreach program to ten additional communities in 1989. Because of success of the pilot project, the Association received 80 applications from groups who wanted to undertake an outreach project in their community. The five spring sites ultimately selected were Asheville, North Carolina; San Antonio, Texas; Rutland, Vermont; Sacramento, California; and Lac Du Flambaeu, Wisconsin. Their outreach activities took place from April to July.

Preliminary results from our spring outreach sites are encouraging. During the months of May, June and July 1989, applications in the five sites increased by 38 percent and awards increased by 37

percent.

The remaining five 1989 sites are starting their outreach efforts this fall in Portland, Oregon; Denver, Colorado; Des Moines, Iowa; Winter Park, Florida; and East Orange, New Jersey. We would be glad to provide the committees with additional statistics when they become available.

III Features of AARP's Outreach

1. Coalitions

The key to the success of the AARP outreach projects is the use of coalitions of local organizations. This approach allows active involvement of local citizens committed to helping low-income people in their community.

AARP provides technical assistance, training, material, videotapes and some publicity. The local agency assumes a leadership role in building and guiding a coalition of agencies to provide the broad-based support necessary to reach the elderly poor. Groups that participate in the coalition may include the area agency on aging, information and referral agencies, religious organizations, health care providers, utility companies, advocacy organizations, legal services, and service providers for the elderly, blind or disabled. All coalition members participate in the training and project

activities.

Local cosponsorship involves many things. In addition to committing staff time, the local lead agency must cover many of the local project expenses. Unfortunately, the financial commitment required of participating local organizations precludes some otherwise interested local groups from participating.

2. Outreach Techniques

The major methods employed in our 1988 and 1989 efforts have included extensive use of the media, training of social service providers, conducting community education presentations, and one-to-one counseling of potential applicants.

- **Training**

The training provides advocates and service providers with a one-day, in depth explanation of the SSI program and its complexities. It is important to have this ongoing training of advocates who can assist with public benefit issues in general and SSI in particular. AARP has found that extensive training of social service providers has resulted in more effective identification of those who are eligible for SSI.

During the training, advocates also receive information on their

state Medicaid program. It is important to emphasize the linkage between SSI and Medicaid because many potential applicants do not know about it. The availability of Medicaid can serve as an incentive to apply for SSI even though the monthly cash benefit may be low.

In addition to the training, participants receive a training manual which is used as a resource guide.

- **Media**

Use of the broadcast and print media are an essential component of outreach activities. They are an important means for funnelling information to potential recipients.

Successful use of the broadcast media was best illustrated by the one day "Phoneathon" in Pittsburgh. This included short TV segments with SSI recipients during the 12 noon, 6 p.m. and 11 p.m. newscasts. These were followed by a live interview with the district manager of the Social Security office and a request that those with questions call the station to get answers from the cadre of volunteer SSI advocates who were at the TV station. Over 5,000 calls were received during the course of the day, and many of those calling were referred to the local Social Security office to file an application. The questions that were asked of volunteers, regarding income, resources, disability and living arrangement situations, reconfirmed our belief that the job of informing the

public about SSI must be an ongoing one.

3. Reaching Minority Populations

Special attention must be paid to informing those not reached through traditional methods of outreach such as minority groups. In El Paso, Texas, a large portion of the population responding to the SSI outreach efforts were Hispanics. Outreach to this community included working with local church groups, using the Spanish language TV and radio stations, translating materials into Spanish and using a bilingual, bicultural outreach worker in the area agency on aging to answer SSI inquiries.

In 1989, AARP expanded the demonstration project to other minority populations. In Wisconsin our efforts focused on twelve Indian reservations; and, in San Antonio, Texas we again worked with the Hispanic population. In both instances the cosponsors selected were organizations with credibility in the minority community. This fall, the site in New Jersey will emphasize reaching the older black population.

4. Social Security Administration Involvement

The outreach project will be more successful if there is cooperation from the local SSA office. In 1988 the SSA district

offices cooperated with AARP and the area agency on aging. They assisted with training programs, provided materials, and suggested outreach techniques. In 1989, the local SSA district office in Rutland, Vermont formally acted as the local cosponsoring agency.

IV Future Outreach

AARP hopes to continue expanding its outreach program in several ways. We are developing an SSI "How To" manual and a videotape. These materials will provide interested communities with options for establishing their own outreach program. AARP will also be available for some technical assistance.

In addition, AARP is planning to expand its outreach activities to 20 new sites. Outreach efforts will encompass other public benefit programs such as food stamps, Medicaid, and Low Income Housing and Energy Assistance programs, as well. Funded by the Commonwealth Commission on the Elderly Living Alone, these activities will begin in 1990.

While AARP's outreach has been successful, those involved in our outreach efforts confirm what most people instinctively think--a national coordinated effort by the Social Security Administration and implemented at the local level is needed in order to reach those throughout our nation who are eligible for, but not

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participating in SSI. Local communities and organizations should not be expected to fill the current outreach void, nor can they reach the large number of potentially eligible participants nationwide who currently subsist on incomes below the modest one SSI provides.

AARP is encouraged by the commitment of Gwendolyn King, the new Social Security Commissioner, to expanding SSA's outreach activities to potential SSI recipients. Successful SSA outreach projects and SSA activities in tandem with other agencies can help potential SSI recipients. In addition, it would help alleviate the burden on local governments who now must provide all of the assistance to low-income elderly, blind and disabled who are not receiving SSI.

Mr. DOWNEY. Thank you, Lou. Mr. Koski, let me just ask you one question. You, in your testimony, outlined a broad prescription for what ails SSI and I welcome that, but it you had to limit what was going to happen, how would you do that, I mean, if we can for instance get the income disregarded this year, the one-third reduction, what would you have us do next year?

Mr. KOSKI. I would fall back on increasing the benefit levels if that doesn't come through this year. I think that—

Mr. DOWNEY. Well, we have done that as well as you know.

Mr. KOSKI. I know, I am saying if that doesn't pass out of the Senate or the conference. I think after that it really comes to changing the whole attitude that the Social Security Administration has had in the past with the program. We have touched on a lot of these things and one way again is to have them involved in outreach projects, but then change some of the rules that make the program so complex. I mean, the application as you know is long because there are so many complex rules, like in kind assistance and other aspects of the program, so I would say if you could change some of those rules so that people aren't baffled by the program and get some help in applying for it, and then change the way the program is administered, then people will not just get knocked off but will be helped to get qualified for the program if they are eligible. That would be my goal.

Mr. DOWNEY. Good. Paul?

Mr. HARENBERG. I had not realized that the AARP was doing so much in this area. It is very interesting information you have given us, and the success rate too is fantastic of the pilot project that you did in the three cities, it is very fine. Good work.

Mr. KRIEGER. Paul, the AARP appreciates your efforts in securing funds so that the State Office of the Aging can set up an outreach program. We appreciate it very much.

Mr. DOWNEY. Louise?

Ms. SLAUGHTER. No questions.

Mr. DOWNEY. Ben?

Mr. BLAZ. I'm just overwhelmed by this quite frankly Tom. I must say that I thought after the first panel and the second panel, you guys are really quite exciting because I know more about AARP than I have ever known and I am a member. Mr. Koski, I thought you made some very fine recommendations. I have no questions.

Mr. DOWNEY. No, far from that. They have raised the questions and it is up to us to provide some of the money. We have made a very good start this year on changing the level of outreach and this income disregard question and also on the level of benefit. If we can hold it in the conference, it would be a very successful.

Mr. KRIEGER. We'd like the one-third rule also.

Mr. DOWNEY. Yes, and we will live and hope. We thank you both for coming out here and for providing us this information. This hearing is adjourned.

[Whereupon, the hearing was adjourned.]

APPENDIX

Additional material received for the hearing record

APP

ROUTING AND TRANSMITTAL SLIP	Date: SEP 27 1989

TO:

Mr. John Olinger
Staff, Subcommittee on Human Services
Select Committee on Aging
House of Representatives
Room 811, House Annex 1
Washington, D.C., 20515

	Action		FYI
	Approval		Investigate
XXXX:	As Requested		Justify
	Circulate		Note and Return
	Comment		Per Conversation
	Coordination		Prepare Reply
	File		See Me
	For Clearance		Signature
	For Correction		

REMARKS:

Per your request to Glen Dehn, attached is an application for Supplemental Security Income. Please note that it is not intended as a self-help form but rather is meant to be completed by an SSA claims representative during a personal contact interview with the claimant.

FROM: Gil Fisher

Gil Fisher
Acting Associate Commissioner
for Legislation and Congressional
Affairs, SSA

Room Bldg
152 Alt

Phone
(301) 965-3737

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Social Security Administration

☐ TEL

Form Approved
OMB No. 0960-0229

APPLICATION FOR SUPPLEMENTAL SECURITY INCOME

Do not write in this space

I am/We are applying for Supplemental Security Income and any federally administered State supplementation under title XVI of the Social Security Act, for benefits under the other programs administered by the Social Security Administration, and where applicable, for medical assistance under title XIX of the Social Security Act.

☐ FS-SSA/APP ☐ FS-REFERRED

Filing Date
Month, Day, Year

☐ Actual or ☐ Protective

TYPE OF CLAIM ☐ Individual with Ineligible Spouse ☐ Couple ☐ Individual ☐ Child ☐ Child with Parent(s)

PART I—BASIC ELIGIBILITY—The questions in this section pertain to the period beginning with the first moment of the filing date month through the date this application is signed unless a question specifies a different time period.

1. (a) First Name, Middle Initial, Last Name | Birth (month, day, year) | Sex ☐ Male ☐ Female | Social Security Number ___ / ___ / ____

   (b) Did you ever use any other names (including maiden name) or other Social Security numbers? → ☐ YES Go to (c) ☐ NO Go to #2

   (c) Other Names and Social Security Numbers Used

2. (a) Are you married? → ☐ YES Go to (b) ☐ NO Go to #4

   (b) Spouse's Name (First, middle initial, last) | Birth (month, day, year) | Social Security Number ___ / ___ / ____

   (c) Did your spouse ever use any other names (including maiden name) or other Social Security Numbers? → ☐ YES Go to (d) ☐ NO Go to (e)

   (d) Other Names (including maiden name) and Social Security Numbers Used by Spouse

   (e) Are you and your spouse living together? → ☐ YES If your spouse is not filing go to #3; otherwise go to #4. ☐ NO Go to (f)

   (f) Date you began living apart | Address of spouse or name and address of someone who knows where the spouse is.

   (g) IF YOUR SPOUSE IS NOT FILING FOR SUPPLEMENTAL SECURITY INCOME AND YOU SEPARATED SINCE THE FIRST MOMENT OF THE FILING DATE MONTH GO TO #3. IF YOUR SPOUSE IS FILING FOR SUPPLEMENTAL SECURITY INCOME, GO TO #4.

3. (a) Is your spouse the sponsor of an alien for supplemental security income? → ☐ YES Go to (b) ☐ NO Go to #4

   (b) Alien's Name | Alien's Social Security Number ___ / ___ / ____

		You	Your Spouse, If filing
4.	(a) Have you been married before? →	☐ YES Go to (b) ☐ NO Go to #5	☐ YES Go to (b) ☐ NO Go to #5

(b) Give the following information about your former spouse. If there was more than one former marriage, show the remaining information in Remarks and go to #5.

	FORMER SPOUSE'S NAME (including maiden name)	SOCIAL SECURITY NUMBER (If none or unknown, so indicate)	DATE OF MARRIAGE	DATE MARRIAGE ENDED	HOW MARRIAGE ENDED
You					
Your Spouse					

		You	Your Spouse
5.	(a) Are you blind or disabled? →	☐ YES Go to (b) ☐ NO Go to #6	☐ YES Go to (b) ☐ NO Go to #6

(b) GIVE THE FOLLOWING INFORMATION	DATE IMPAIRMENT BEGAN	NATURE OF THE IMPAIRMENT
You		
Your Spouse		

		You	Your Spouse, If filing
6.	In what city and State or foreign country were your born? →		
7.	Are you a United States citizen by birth? →	☐ YES Go to #11 ☐ NO Go to #8	☐ YES Go to #11 ☐ NO Go to #8
8.	Are you a naturalized United States citizen? →	☐ YES Go to #11 ☐ NO Go to #9	☐ YES Go to #11 ☐ NO Go to #9
9.	(a) Are you lawfully admitted for permanent residence in the United States? →	☐ YES Go to (b) ☐ NO Go to #10	☐ YES Go to (b) ☐ NO Go to #10
	(b) Give the month, day, and year of lawful admission for permanent residence. If date is within 3 years of the filing date, go to (c); otherwise go to #11. →	DATE	DATE
	(c) Was your entry into the United States sponsored by any person or promoted by an institution or group? →	☐ YES Go to (d) ☐ NO Go to #11	☐ YES Go to (d) ☐ NO Go to #11

(d) Give the following information about the person, institution, or group:

Name	Address	Telephone No. *(Include Area Code)*
		(_ _ _) -

(e) GO TO #11

		You	Your Spouse, If filing
10.	(a) Is the Immigration and Naturalization Service (INS) aware of your presence in the United States? →	☐ YES Go to (b) ☐ NO Go to #11	☐ YES Go to (b) ☐ NO Go to #11
	(b) Through what date will INS allow you to remain in the United States? (If indefinitely, so indicate) →	DATE *(month, day, year)*	DATE *(month, day, year)*
11.	(a) When did you first make your home in the United States? →	DATE *(month, day, year)*	DATE *(month, day, year)*
	(b) Have you lived outside the United States since then? →	☐ YES Go to (c) ☐ NO Go to #12	☐ YES Go to (c) ☐ NO Go to #12
	(c) Give dates of residence outside the United States. *(Month, day, year)* →	FROM: TO:	FROM: TO:
12.	(a) Have you been outside the United States (the 50 states, District of Columbia and Northern Mariana Islands) 30 days prior to the filing date? →	☐ YES Go to (b) ☐ NO Go to #13	☐ YES Go to (b) ☐ NO Go to #13
	(b) Give the date *(Month, day, year)* you left the United States and the date you returned to the United States. →	Date Left Date Returned	Date Left Date Returned

PART II—LIVING ARRANGEMENTS—The questions in this section pertain to the signature date.

13. Check the applicable block to show where you live now:

☐ House ☐ Apartment ☐ Room (private home) ☐ Room (commercial establishment) ☐ Mobile Home ☐ Foster Home ☐ Transient ☐ Other (Specify) _____

INSTITUTIONS

☐ School ☐ Hospital ☐ Rest or Retirement Home ☐ Nursing Home ☐ Rehabilitation Center ☐ Jail ☐ Other (Specify) _____

IF YOU ARE LIVING IN A FOSTER HOME, AN INSTITUTION, OR ARE A TRANSIENT, EXPLAIN IN REMARKS AND GO TO #21.

14. Do you live alone or with your spouse only? → ☐ YES Go to #16 ☐ NO Go to #15

15. (a) Give the following information about everyone who lives with you (or with you and your spouse):

NAME	RELATIONSHIP TO YOU OR SPOUSE	SEX M	SEX F	DATE OF BIRTH (Month, day, year)	BLIND OR DISABLED YES	BLIND OR DISABLED NO	IF UNDER AGE 22 MARRIED YES	IF UNDER AGE 22 MARRIED NO	IF UNDER AGE 22 STUDENT YES	IF UNDER AGE 22 STUDENT NO

(b) Do all the persons listed in 15(a) receive assistance or income based on need? → ☐ YES Go to (c) ☐ NO Go to (c)

(c) Does anyone listed in 15(a) who is not married and under age 18 OR between ages 18-21, not married, and a student receive income? → ☐ YES Go to (d) ☐ NO Go to #16

(d) CHILD RECEIVING INCOME	SOURCE & TYPE	MONTHLY AMOUNT
		$ -
		$
		$

16. (a) Do you (or does anyone who lives with you) own or rent the place where you live? → ☐ YES Go to #17 ☐ NO Go to (b)

(b) Name and address of person who owns or rents the place where you live: | Telephone number, if known *(Include Area Code)* (___) -

(c) GO TO #20

17. (a) Are you (or your living with spouse) buying or do you own the place where you live? → ☐ YES Go to (c) ☐ NO If you are a child living with parent(s) go to (b); otherwise go to #18.

(b) Are your parent(s) buying or do they own the place where you live? → ☐ YES Go to (c) ☐ NO Go to #18

(c) What is the amount and frequency of the mortgage payment? → Amount $ | Frequency of Payment

(d) GO TO #20

18.	(a) Do you (or your living with spouse) have rental liability for the place where you live? →	☐ YES Go to (d)	☐ NO If you are a with parent; otherwise g
	(b) Do your parent(s) have rental liability? →	☐ YES Go to (d)	☐ NO Go to (c)
	(c) Does anyone who lives with you have rental liability for the place where you live? →	☐ YES Give name of person with rental liability in Remarks and go to #19	☐ NO Give name with home in Remarks #20.
	(d) What is the amount and frequency of the rent payment? →	Amount $	Frequency of pay
19.	(a) Are you (or anyone who lives with you) the parent or child of the landlord or the landlord's spouse? →	☐ YES Go to (b)	☐ NO Go to #20
	(b) Name of person related to landlord or landlord's spouse:	Relationship	Name and address of landlord (include telephone nu and area code, if known):
20.	(a) Does anyone who does NOT live with you provide your household with all or part of the food and shelter (including payment of the bills for food, rent or home mortgage payments, property insurance required by the mortgage holder, real property taxes, heating fuel, gas, electricity, garbage removal, water, or sewerage) or give the household money for these items? →	☐ YES Go to (b)	☐ NO Go to (d) your livi spouse) rent; othe to #21.

(b) ITEM	CONTRIBUTOR'S NAME AND ADDRESS (TELEPHONE NUMBER AND AREA CODE, IF KNOWN)	MONTHLY AMOUNT	MO REC
		$	
		$	
		$	
		$	

(c) GO TO (d) IF YOU (OR YOUR LIVING WITH SPOUSE) OWN OR RENT AND YOU DO NOT LIV PUBLIC ASSISTANCE HOUSEHOLD; OTHERWISE, GO TO #21.

	(d) Does anyone living with you give you (or your living with spouse) money for or help pay for all or part of your food, rent or home mortgage payments, property insurance required by the mortgage holder, real property taxes, heating fuel, gas, electricity, garbage removal, water, or sewer bills? →	☐ YES Go to #21	☐ NO Go to #21
21.	(a) Has the information given in items #13 through #20 been the same since the first moment of the filing date month? →	☐ YES Go to (b)	☐ NO Explain in F and go to (
	(b) Do you expect this information to change? →	☐ YES Explain in Remarks and go to #22	☐ NO Go to #22

PART III—RESOURCES—The questions in this section pertain to the first moment of the date month.

22.	(a) Do you own or does your name appear on the title of any vehicles; e.g., cars, trucks, boats, motorcycles, etc.? →	You ☐ YES Go to (b) ☐ NO Go to #23	Your Spous ☐ YES Go to (b) ☐ Go

(b) OWNER'S NAME	DESCRIPTION (YEAR, MAKE & MODEL)	USED FOR	EQUIPPED FOR HANDICAPPED? YES	NO	CURRENT MARKET VALUE	AMO OW
					$	$
					$	$
					$	$

23. (a) Do you own or are you buying any life insurance policies? → | You: ☐ YES Go to (b) ☐ NO Go to #24 | Your Spouse: ☐ YES Go to (b) ☐ NO Go to #24

(b) Give the following information on each policy:

OWNER'S NAME	NAME OF INSURED	NAME AND ADDRESS OF INSURANCE COMPANY
Policy (#1)		
Policy (#2)		
Policy (#3)		

POLICY NUMBER	FACE VALUE	CASH SURRENDER VALUE	DATE PURCHASED	LOANS AGAINST YES	LOANS AGAINST NO
Policy (#1)	$	$		$	
Policy (#2)	$	$		$	
Policy (#3)	$	$		$	

24. (a) Do you (either alone or jointly with any other person) own any:

	You YES	You NO	Your Spouse YES	Your Spouse NO
Life estates or ownership interest in an unprobated estate? →				
Household or personal items worth more than $500 each? →				

(b) Give the following information for any "Yes" answer in 24(a); otherwise go to #25

OWNER'S NAME	NAME OF ITEM	VALUE	AMOUNT OWED ON ITEM	WHERE APPROPRIATE, GIVE NAME AND ADDRESS OF BANK OR OTHER ORGANIZATION
		$	$	
		$	$	

25. (a) Do you own or does your name appear (either alone or with any other person's name) on any of the following items?

	You YES	You NO	Your Spouse YES	Your Spouse NO
Cash at home, with you, or anywhere else →				
Checking Accounts →				
Savings Accounts →				
Credit Union Accounts →				
Christmas Club Accounts →				
Certificates of Deposit →				
Notes →				
Stocks or Mutual Funds →				
Bonds →				
Other items that can be turned into cash →				

(b) Give the following information for any "Yes" answer in 25(a); otherwise go to #26

OWNER'S NAME	NAME OF ITEM	VALUE	NAME AND ADDRESS OF BANK OR OTHER ORGANIZATION IF APPROPRIATE	IDENTIFYING NUMBER
		$		
		$		
		$		
		$		

26.	(a) Do you have any land, houses, buildings, real property, property in foreign countries, equipment, business, mineral rights or other money or property of any kind (including belongings held in safe deposit boxes) that have not been shown elsewhere on the application? (Include assets set aside for an emergency or to provide for your heirs.) ——→	You	Your Spouse
		☐ YES Go to (b) ☐ NO Go to #27	☐ YES Go to (b) ☐ NO Go to #

(b) Give the following information:

DESCRIPTION OF PROPERTY (If real property, include type and size of structure, acreage or lot size, location.)	HOW IS IT USED? (If not used now, when was last used and what is next planned use.)
Item 1	Item 1
Item 2	Item 2

OWNER'S NAME	ESTIMATED CURRENT MARKET VALUE	TAX ASSESSED VALUE	AMOUNT OF MORTGAGE PAYMENT	AMOUNT OWE ON ITEM
Item 1	$	$	$	$
Item 2	$	$	$	$

27.	(a) Have you sold, transferred title, disposed of or given away any money or other property, including property or money in foreign countries, since the first moment of the filing date month or within the 30 months prior to the filing date month?	You	Your Spouse, if filing
		☐ YES Go to (b) ☐ NO Go to #28	☐ YES Go to (b) ☐ NO Go to #

(b) Give the following information:

OWNER'S NAME	DATE OF DISPOSAL	DESCRIPTION OF PROPERTY
Item 1		
Item 2		

IF THE DATE OF DISPOSAL IS BEFORE 7/1/88 AND LESS THAN 24 MONTHS PRIOR TO THE MONTH OF FILING OR IF THE DATE OF DISPOSAL IS AFTER 6/30/88, GO TO 27(c); OTHERWISE GO TO #28.

(c) Give the following about the information in 27(b):

NAME AND ADDRESS OF PURCHASER OR RECIPIENT	RELATIONSHIP TO OWNER	SOLD ON OPEN MARKE	
		YES	NO
Item 1			
Item 2			

VALUE OF PROPERTY AND/OR AMOUNT OF CASH GIFT	SALES PRICE OR OTHER AGREEMENT	ARE ADDITIONAL CONSIDERATIONS OR PROCEEDS EXPECTED? EXPLAIN	DO YOU STILL OWN PA OF THE PROPERTY	
			YES	NO
Item 1 $				
Item 2 $				

28.	(a) Have you acquired any resource since the first moment of the filing date month? →	You: ☐ YES Go to (b) ☐ NO Go to (c)	Your Spouse: ☐ YES Go to (b) ☐ NO Go to (c)

(b) Explain any "Yes" answer given in 28(a)

You	Your Spouse

	(c) Has there been any increase or decrease in the value of your resources since the first moment of the filing date month? →	You: ☐ YES Go to (d) ☐ NO Go to #29	Your Spouse: ☐ YES Go to (d) ☐ NO Go to #29

(d) Explain any "Yes" answer given in 28(c)

You	Your Spouse

29.	(a) Do you have any assets set aside for burial expenses such as burial contracts, trusts, agreements, or anything else you intend for your burial expenses? Include any assets mentioned in items #22 through #26 and item #28. →	You: ☐ YES Go to (b) ☐ NO Go to #30	Your Spouse: ☐ YES Go to (b) ☐ NO Go to #30

(b) DESCRIPTION (Where appropriate, give name and address of organization and account/policy number)	VALUE	WHEN SET ASIDE (Month, Day, Year)	OWNER'S NAME
Item 1	$		
Item 2	$		

FOR WHOSE BURIAL	IS ITEM IRREVOCABLE?	WILL INTEREST EARNED OR APPRECIATION IN VALUE REMAIN IN THE BURIAL FUND?
Item 1	☐ YES ☐ NO	☐ YES Go to #30 ☐ NO Explain in (c)
Item 2	☐ YES ☐ NO	☐ YES Go to #30 ☐ NO Explain in (c)

(c) Explanation:

Item 1
Item 2

30.	(a) Do you own any cemetery lots, crypts, caskets, vaults, urns, mausoleums or other repositories for burial or any headstones or markers? →	You: ☐ YES Go to (b) ☐ NO Go to #31	Your Spouse: ☐ YES Go to (b) ☐ NO Go to #31

(b) OWNER'S NAME	DESCRIPTION	FOR WHOSE BURIAL	RELATIONSHIP TO YOU OR SPOUSE	CURRENT MARKET VALUE (If applicable)
				$
				$

PART IV—INCOME—The questions in this section specify time period.

31. (a) Since the first moment of the filing date month, have you received or do you expect to receive income in the next 14 months from any of the following sources?

	YOU		YOUR SPOUSE	
	YES	NO	YES	NO
FEDERAL BENEFITS: Social Security				
Railroad Retirement				
Veterans Administration (Based on need/not based on need)				
Office of Personnel Management (Civil Service)				
Military Pension, Special Pay, or Allowance				
Black Lung				
Bureau of Indian Affairs				
Earned Income Tax Credits				
STATE/LOCAL BENEFITS: Unemployment Compensation				
Workers' Compensation				
State Disability				
State or Local Pension				
Aid to Families with Dependent Children				
State or Local Assistance Based on Need				
PRIVATE BENEFITS: Employer or Union Pension				
Insurance or Annuity Payments				
MISCELLANEOUS: Interest (bank accounts, stocks, CD's, etc.)				
Rental/Lease Income				
Dividends/Royalties				
Alimony				
Child Support				
OTHER INCOME NOT PREVIOUSLY MENTIONED				

(b) Give the following information for any "Yes" answer in 31(a); otherwise go to #32.

PERSON RECEIVING	TYPE OF INCOME	AMOUNT	FREQUENCY	DATES EXPECTED OR RECEIVED	SOURCE (Name Address of Person, Bank, Company, or Organization)	IDEN NU
You		$		From: / To:		
You		$		From: / To:		
You		$		From: / To:		
Your Spouse		$		From: / To:		
Your Spouse		$		From: / To:		
Your Spouse		$		From: / To:		

32.	Since the first moment of the filing date month, have you received or do you expect to receive any clothing, meals, or other gifts which are not cash? ⟶	You: ☐ YES Explain in Remarks and go to #33 ☐ NO Go to #33	Your Spouse: ☐ YES Explain in Remarks and go to #33 ☐ NO Go to #33
33.	(a) Have you received wages since the first moment of the filing date month through the current month? ⟶	☐ YES Go to (b) ☐ NO Go to (d)	☐ YES Go to (b) ☐ NO Go to (d)

(b) Name and Address of Employer *(include telephone number and area code, if known)*

You	Your Spouse

(c) Total wages received (before any deductions) for each month:

You	Month(s)						
	Amounts						
Your Spouse	Month(s)						
	Amounts						

(d) Do you expect to receive any wages in the next 14 months? ⟶	You: ☐ YES Go to (e) ☐ NO Go to #34	Your Spouse: ☐ YES Go to (e) ☐ NO Go to #34

(e) Name and address of employer if different from 33(b) *(include telephone number and area code, if known)*

You	Your Spouse

(f) Give the following information:

	RATE OF PAY	AMOUNT WORKED PER PAY PERIOD	HOW OFTEN PAID	PAY DAY OR DATE PAID	DATE LAST PAID *(Month, day, year)*
You	$ per				
Your Spouse	$ per				

(g) Do you expect any change in wage information provided in 33(f)? ⟶	You: ☐ YES Go to (h) ☐ NO Go to #34	Your Spouse: ☐ YES Go to (h) ☐ NO Go to #34

(h) Explain change:

You	Your Spouse

34.	(a) Have you been self-employed at any time since the beginning of the taxable year in which the filing date month occurs or do you expect to be self-employed in the current taxable year?	You: ☐ YES Go to (b) ☐ NO Go to #35	Your Spouse: ☐ YES Go to (b) ☐ NO Go to #35

(b) Give the following information:

	TYPE OF BUSINESS	LAST YEAR'S: GROSS INCOME	LAST YEAR'S: NET INCOME	LAST YEAR'S: NET LOSS	THIS YEAR'S: GROSS INCOME	THIS YEAR'S: NET INCOME	THIS YEAR'S: NET LOSS	DATES OF SELF-EMPLOYMENT
You		$	$	$	$	$	$	
		$	$	$	$	$	$	
Your Spouse		$	$	$	$	$	$	
		$	$	$	$	$	$	

IF YOU OR YOUR SPOUSE ARE DISABLED AND RECEIVE WAGES OR EXPECT TO RECEIVE WAGES OR A SELF-EMPLOYED OR EXPECT TO BE SELF-EMPLOYED, ANSWER #35; OTHERWISE, GO TO #36.

		You	Your Spouse
35.	Do you have any special expenses related to your illness or injury that you paid which are necessary for you to work? →	☐ YES Describe in Remarks and go to #36 ☐ NO Go to #36	☐ YES Describe in Remarks and go to #36 ☐ NO Go to #

IF YOU ARE FILING AS A CHILD UNDER AGE 22 AND ARE EMPLOYED OR RECEIVE CHILD SUPPORT, GO #36; OTHERWISE, GO TO #37.

36.	(a) Have you attended school regularly since the filing date month? →	☐ YES Go to (d)	☐ NO Go to (b)
	(b) Have you been out of school for more than 4 calendar months? →	☐ YES Go to (c)	☐ NO Go to (c)
	(c) Do you plan to attend school regularly during the next 4 months? →	☐ YES Explain absence in Remarks and go to (d)	☐ NO Go to #37

(d) Give the following information:

NAME AND ADDESS OF SCHOOL	NAME OF PERSON AT SCHOOL WE MAY CONTACT	DATES OF ATTENDANCE		COURSE OF STUDY
	NAME	FROM	TO	
	PHONE *(include area code)* ( ) -	HOURS ATTENDING OR PLANNING TO ATTEND		

PART V—POTENTIAL ELIGIBILITY FOR OTHER BENEFITS/FOOD STAMPS/MEDICAL ASSISTANCE

		YOU		YOUR SPOUSE	
37.	(a) Have you or a former spouse (or if you are filing as a child, have you or your parents) ever:	YES	NO	YES	NO
	Worked for a railroad?				
	Been in military service?				
	Worked for the Federal government?				
	Worked for a State or local government?				
	Worked for an employer or belonged to a union with a pension plan?				
	Done work that was covered under the Social Security system or pension plan of a country other than the United States?				

(b) Explain any "Yes" answer given in 37(a), otherwise go to #38

YOU	YOUR SPOUSE

		You		Your Spouse, If filing	
38.	(a) Are you currently receiving food stamps or has a food stamp application been filed for you within the past 60 days on which there has not been a decision? →	☐ YES Go to #39	☐ NO Go to (b)	☐ YES Go to #39	☐ NO Go to (b)
	(b) Do you wish to apply for food stamps? →	☐ YES	☐ NO	☐ YES	☐ NO

39. **Where this application is an application for Title XIX under the Social Security Act, I/we understand that if I/we refuse to assign my/our rights to medical support and payments for medical care from any individual or private, group, or government health insurance, or refuse to cooperate in giving information regarding any health insurance I/we may have, that the Social Security Administration cannot determine whether I am/we are eligible for Medicaid and that I/we must then apply for Medicaid at the Medicaid agency. I/we also understand that as a condition to become eligible for Medicaid, I/we must cooperate with the Medicaid agency in establishing paternity and in obtaining medical support and payments from third party payers.**

IN STATES WITH AUTOMATIC ASSIGNMENT OF RIGHTS LAWS, GO TO 39(b).

	You		Your Spouse, if filing	
(a) Do you agree to assign your rights (or the rights of anyone for whom you can legally assign rights) to payments for medical support and other medical care to the State Medicaid agency? ——→	☐ YES Go to (b)	☐ NO Go to #40	☐ YES Go to (b)	☐ NO Go to #40
(b) Do you, your spouse, parent or step-parent have any private, group, or government health insurance that pays the cost of your medical care? (Do not include Medicare or Medicaid) ——→	☐ YES	☐ NO	☐ YES	☐ NO
(c) Do you have any unpaid medical expenses for the 3 months prior to the filing date month? ——→	☐ YES	☐ NO	☐ YES	☐ NO

PART VI—MISCELLANEOUS

ANSWER #40 ONLY IF YOU (OR YOUR SPOUSE, IF FILING) ARE BLIND OR DISABLED, OTHERWISE, GO TO #41.

40.	You		Your Spouse, if filing	
Do you give your permission for SSA to provide the results of any consultative examination to your own physician? ——→	☐ YES Go to #41	☐ NO Go to #41	☐ YES Go to #41	☐ NO Go to #41

ANSWER #41 ONLY IF YOU ARE REQUESTING BENEFITS ON BEHALF OF SOMEONE ELSE; OTHERWISE, GO TO #42.

41. (a) Name of Person Requesting Benefits | Relationship to Claimant | Your Social Security Number ___ ___ ___/___ ___/___ ___ ___ ___

(b) Do you wish to be selected as the claimant's representative payee? ——→	☐ YES	If you are applying on behalf of a child go to (c); otherwise go to #42.	☐ NO	Explain in Remarks and go to #42.
(c) Are you the natural or adoptive parent with custody? ——→	☐ YES	Go to (d)	☐ NO	Go to (d)
(d) Have you ever been convicted of a felony? ——→	☐ YES	Explain in Remarks and go to (e)	☐ NO	Go to (e)
(e) Are you serving, or have you ever served, as representative payee for anyone receiving a Social Security or Supplemental Security Income benefit? ——→	☐ YES	Enter SSN's in Remarks and go to (f)	☐ NO	Go to (f)
(f) Does the claimant have a legal representative or a legal guardian appointed by a court? ——→	☐ YES	If you are NOT the legal rep/guardian, go to (g); otherwise go to (h).	☐ NO	Go to #42

(g) Give the following information about the legal representative or legal guardian:

Name	Address	Telephone Number *(Include area code, if known)*
		(___) -

(h) Explain what led the court to appoint a legal representative or a legal guardian.

PART VII—REMARKS—(You may use this space for any explanations. Enter the item number before each explanation. If you need more space, use a signed form SSA-795.)

IMPORTANT INFORMATION—PLEASE READ CAREFULLY

- Failure to report any change within 10 days after the end of the month in which the change occurs could result in a penalty deduction.
- The Social Security Administration will check your statements and compare its records with records from other State and Federal agencies, including the Internal Revenue Service, to make sure you are paid the correct amount.
- If you are disabled or blind, you must accept any appropriate vocational rehabilitation services offered to you by the State agency to which we refer you.

PART VIII—SIGNATURES

I/We understand that anyone who knowingly lies or misrepresents the truth or arranges for someone to knowingly lie or misrepresent the truth is committing a crime which can be punished under Federal law, State law, or both. Everything on this application is the truth as best I/we know it.

42. Your Signature *(First name, middle initial, last name) (Write in ink)* — Date *(Month, day, year)*

SIGN HERE ▶

Telephone number(s) at which you may be contacted during the day (___ ___)- AREA CODE

43. Spouse's Signature *(First name, middle initial, last name) (Write in ink)*

(Sign only if applying for payments.)

SIGN HERE ▶

44. FOR OFFICIAL USE ONLY — DIRECT DEPOSIT PAYMENT ADDRESS *(FINANCIAL INSTITUTION)*

Routing Transit Number	C/S	Depositor Account Number	☐ No Account ☐ Direct Deposit Refused

45. Applicant's Mailing Address *(Number and Street, Apt. No., P.O. Box or Rural Route)*

City and State	ZIP Code	Enter name of county (if any) in which you live

46. Claimant's Residence Address *(If different from applicant's mailing address)*

City and State	ZIP Code	Enter name of county (if any) in which the claimant lives

WITNESSES

47. Your application does not ordinarily have to be witnessed. However, you have signed by mark (X), two witnesses to the signing who know you must sign below giving their full addresses.

1. Signature of Witness	2. Signature of Witness
Address *(Number and Street, City, State, and ZIP Code)*	Address *(Number and Street, City, State, and ZIP Code)*

RECEIPT FOR YOUR CLAIM FOR SUPPLEMENTAL SECURITY INCOME

NAME	SOCIAL SECURITY NUMBER	DATE
	___ / __ / ____	
NAME	SOCIAL SECURITY NUMBER	
	___ / __ / ____	

Telephone Number *(include area code)* to call if you have a question or something to report.	Social Security Office you may come in person or mail your request to:
(__)-	

Your application for Supplemental Security Incor will be processed as quickly as possible. If you have trouble getting any information or records we have asked for, pleas contact us and we will help you.

You should hear from us within days after you have given us all the information we requested. Some claims may take longer if additional information is needed. If you do not get a check or a notice of determination within that time, please get in touch with us in person, by mail, or by calling the telephone number shown above.

PAPERWORK/PRIVACY ACT NOTICE

The Social Security Administration is authorized to collect the information on your application form under Section 1631(e) of the Social Security Act, as amended (42 U.S.C. 1383(e)). Your response to this request is voluntary; however, as explained below, no benefits may be paid unless an application has been received by a Social Security office. Your response is mandatory where the refusal to disclose certain information affecting your right to payment would reflect a fraudulent intent to secure payments not authorized by the Social Security Act.

The information on your application is needed to enable Social Security to determine if you are eligible for Supplemental Security Income payments. Failure to provide all or part of the information could prevent an accurate and timely decision on your claim, and could result in the loss of some payments. Although the information you furnish on the application is rarely used for any other purpose than stated in the foregoing, there is a possibility that information may be disclosed to another person or to another governmental agency as follows: (1) to enable a third party or an agency to assist Social Security in establishing rights to Supplemental Security Income payments and (2) to comply with Federal laws requiring the release of information from Social Security records (e.g., to the Veterans Administration). These and other uses of the information obtained are explained and published in the Federal Register. The Social Security Administration will explain these uses further upon request.

Public reporting burden for this collection of information is estimated to average 34 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Social Security Administration ATTN: Reports Clearance Officer, 1-A-21 Operations Bldg., Baltimore, MD 21235 and to the Office of Management and Budget, Paperwork Reduction Project (OMB #0960-0229), Washington, D.C. 20503.

REPORTING RESPONSIBILITIES

The amount of a Supplemental Security Income check is based on the information told to us. You must tell Social Security every time there is a change—while we process your application AND if you start receiving Supplemental Security Income.

Remember, a change may make the SSI monthly payment bigger or smaller. Report changes in income of your ineligible husband/wife or a child who lives with you, or your sponsor or sponsor's spouse if you are an alien. You must also report changes in things of value that these people own.

You must tell us about any change within 10 days after the month it happens. If you do not report changes, we may have to take as much as $25, $50, or $100 out of future checks.

HOW TO REPORT **You can make your reports by telephone at the telephone number shown above or you may report in person or by mail at the address shown above. See reverse side of this page for "Changes to Report."**

CHANGES TO REPORT

☑ **WHERE YOU LIVE — You must report to Social Security if:**

- You move.
- You (or your spouse) leave your household for a calendar month or longer. For example, you enter a hospital or visit a relative.
- You leave the United States for 30 days or more.
- You are released from a hospital, nursing home, etc.
- You are no longer a legal resident of the United States.

☑ **HOW YOU LIVE — You must report to Social Security if:**

- Someone moves into or out of your household.
- The amount of money you pay toward household expenses changes.
- Births and deaths of any people with whom you live.
- Your marital status changes:
  - You get married, separated, divorced, or your marriage is annulled.
  - You separate from your spouse or start living together again after a separation.
  - You begin living with someone as husband and wife.

☑ **INCOME — You must report to Social Security if:**

- The amount of money (or checks or any other type of payment) you receive from someone or someplace goes up or down or you start to receive money (or checks or any other type of payment).
- You start work or stop work.
- Your earnings go up or down.

☑ **HELP YOU GET FROM OTHERS — You must report to Social Security if:**

- The amount of help (money, food, clothing, or payment of household expenses) you receive goes up or down.
- Someone stops helping you.
- Someone starts helping you.

☑ **THINGS OF VALUE THAT YOU OWN — You must report to Social Security if:**

- The value of your resources goes over $2,000 when you add them all together ($3,000 if you are married and live with your spouse).
- You sell or give any things of value away.
- You buy or are given anything of value.

☐ **YOU ARE BLIND OR DISABLED — You must report to Social Security if:**

- Your condition improves or your doctor says you can return to work.
- You go to work.
- You stop going to or refuse any vocational rehabilitation services.
- You stop going to or refuse treatment for drug addiction or alcoholism.

☐ **YOU ARE UNMARRIED AND UNDER AGE 22 — A report to Social Security must be made if:**

- If you are under age 18 and live with your parent(s), ask your parent(s) to report if they have a change in income, a change in their marriage, a change in the value of anything they own, or either has a change in residence.
- You start or stop school.
- You get married.

☐ **YOUR IMMIGRATION AND NATURALIZATION SERVICE (INS) STATUS CHANGES—You must report any change to Social Security.**

☐ **YOU ARE SELECTED AS A REPRESENTATIVE PAYEE — You must report to Social Security if:**

- The person for whom you receive SSI checks has any of the changes listed above. (You may be held liable if you do not report changes that could affect the SSI recipient's payment amount, and he/she is overpaid.)
- You will no longer be able or no longer wish to act as that person's representative payee.

U.S. Government Printing Office: 1989-241-413/20018

NEW YORK STATE OFFICE FOR THE AGING

Mario M. Cuomo, Governor 2 Empire State Plaza, Albany, NY 12223-0001 Jane G. Gould, Director

October 5, 1989

Hon. Thomas J. Downey
U.S. House of Representatives
Chairman, Select Committee on Aging
Subcommittee on Human Services
811 House Office Building Annex 1
Washington, DC 20515

Dear Congressman Downey:

I want to thank you for giving me this opportunity to submit written comments in response to the October 2, 1989 joint hearing entitled, "SSI Outreach: Is the Federal Government Doing Enough?", being held by the Subcommittee on Human Services of the House Select Committee on Aging and the New York State Assembly's Standing Committee on Aging.

Based on data from a study by the New York State Office for the Aging, "Economic Status of the Elderly: Income of Older New Yorkers," as many as 200,000 aged 65+ New Yorkers below poverty who are not receiving Supplemental Security Income (SSI) may be eligible because of their very low income and limited assets. Approximately 120,000 may be federally eligible because their incomes are below the floor established for federal SSI benefits - a number greater than the 111,267 "Aged" eligibles who as of August 1989 received benefits.

On behalf of those 200,000 potentially SSI eligible aged 65 plus New Yorkers who are living below poverty and not receiving benefits, I answer NO to your question "SSI Outreach: Is the Federal Government Doing Enough?"

Multiple studies conducted across the country have documented the fact that 50% of all eligible persons do not receive SSI. These studies have confirmed similar New York State statistics.

Reasons given for low enrollment rates include: lack of awareness that the SSI program exists; language barriers which prevent non-English speakers from applying for SSI; the 15 page

Application which is difficult to complete; and the long waits in Social Security offices. Thus a major initial step toward resolution should be a requirement that the Social Security Administration, the sole administrator of the SSI program, study these issues, analyze its operations, and develop and implement solution strategies. One of the solutions must be the development of linkages with State Units on Aging and Area Agencies on Aging. The Area Agencies are the communities information and referral focal points for all elderly programs and services. Both State Units and Area Agencies on Aging are well-qualified to assist the Social Security offices in implementing outreach because of their existing mechanisms designed to reach older persons.

Effective outreach activities must be designed to identify, seek-out, encourage and assist potentially eligible hard-to-reach, isolated or home bound persons to use existing services and benefits. It often requires a one-on-one relationship with frequent follow-up. The service must be provided by workers trained in outreach techniques.

Effective outreach is an expensive service. Additional federal monies must be made available for these activities. In addition to support for a major media campaign, I believe the most effective and efficient use of such monies would be to channel it through the states to Area Agencies. Those monies would be used to enhance and expand outreach services the Area Agencies currently provide, enabling them to seek out potentially eligible SSI recipients who are not receiving the benefit. Tying SSI outreach into the Aging Network will also ensure that older persons are informed about the wide range of other benefits and entitlements for which they may be eligible.

Another issue regarding SSI that needs to be addressed in any discussion of SSI outreach is the Asset Test. We are in agreement with a report, "Time to Reform the SSI Asset Test," revised August 1988, commissioned by the Public Policy Institutes of the American Association of Retired Persons (AARP) which recommends the following:

> "SSI asset tests should more closely reflect the changes in asset values that have occurred since the program's inception. Changes of this type would measurably increase SSI eligibility and participation while providing help to those who are truly poor.
>
> The application of an asset test that includes non-liquid assets can have unforeseen and undesirable consequences. Potential participants can be locked into an uncomfortable situation in which they cannot qualify for SSI because of assets that are difficult to divest and which, moreover, have little or no value unless they are sold.

The survey data indicate that life insurance policies represent a major barrier to qualifying for SSI. The face value of these policies are typically very low (in most cases $5,000) even if they were higher, why should an insurance policy be any more disqualifying than a home.

There seems to be little, if any justification for the SSI asset test being more stringent than the Food Stamp asset test, which excludes all non-liquid assets."

One final note is that the New York State Office for the Aging under Chapter 545 of the Laws of New York State 1989 is administering a Supplemental Security Income Outreach Program. We will award up to ten grants to either incorporated not-for-profit organizations or Area Agencies on Aging, through a request for proposal process, to develop and implement this program. The ten awards will be focused on rural, suburban and urban areas in this State where there are high percentages of individuals with incomes at or below the federal poverty level and high percentages of minority individuals. Subject to future available federal and/or State appropriations, SOFA will expand this initiative statewide. I have attached a copy of the proposal Abstract we developed which provides an overview of the program.

In closing I want to commend you and Assemblyman Paul Harenberg for your proactive initiatives for the benefit of our most vulnerable citizens, the elderly who are poor.

Sincerely,

Jane G. Gould

Attachment
CC: Assemblyman Paul Harenberg

NEW YORK STATE OFFICE FOR THE AGING

Mario M. Cuomo, Governor 2 Empire State Plaza, Albany, NY 12223-0001 Jane G. Gould, Director

September 29, 1989

Dear Colleague:

I am pleased to announce that the New York State Office for the Aging, under Chapter 545 of the laws of New York State 1989 is administering a Supplemental Security Income (SSI) Outreach Program. We will award up to ten grants to either incorporated not-for-profit organizations or Area Agencies on Aging, through a request for proposal process, to develop and implement this program. The program objective is to identify, seek-out, and encourage hard-to-reach, isolated, or home-bound persons who may be eligible and are not receiving these benefits, and assist them to apply for SSI.

Enclosed is the request for proposal Abstract (Enclosure B) which provides an overview of the program, identifying those areas where SSI outreach activities are eligible for funding. Also enclosed is a Request for Proposal Request Form (Enclosure A) for you to complete if you wish to receive a copy of the Request for Proposal package. Please note that the Proposal Request Form should be in our Office no later than October 13, 1989. This will ensure a timely and complete mailing of the RFP. Please mail it to:

New York State Office for the Aging
Supplemental Security Income (SSI) Outreach Program
P.O. Box 2041
Albany, New York 12220-2041

If you have any questions regarding the SSI Outreach Program, please contact the Progam Director, Nick Cassetta, at (518) 474-2545.

Sincerely,

Jane G. Gould

Jane G. Gould

Enclosures

ENCLOSURE A

REQUEST FOR PROPOSAL

REQUEST FORM

The Supplemental Security Income (SSI) Outreach Program Request for Proposal (RFP) will be mailed upon request only. If you wish to receive the RFP, complete the following form and mail to:

New York State Office for the Aging
Supplemental Security Income (SSI) Outreach Program
P.O. Box 2041
Albany, New York 12220-2041

This form should be received in our Office no later than Friday, October 13, 1989. This will ensure a timely and complete mailing of the RFP.

Please send the Supplemental Security (SSI) Outreach Program Request for Proposal to:

NAME:_____**TITLE:**_____

ORGANIZATION:_____

ADDRESS:_____

CITY:_____**STATE:**_____**ZIP**_____

PHONE:( )_____

NAME OF COUNTY(IES) WHERE THE SSI OUTREACH ACTIVITIES WILL BE CONDUCTED*: _____

*Those areas where SSI outreach activities are eligible for funding are identified on page 2 of the ABSTRACT.

ENCLOSURE B

SSI OUTREACH PROGRAM

REQUEST FOR PROPOSAL

ABSTRACT

PURPOSE

The purpose of this Request for Proposal - Abstract is to announce that the New York State Office for the Aging will make up to ten awards to incorporated not-for-profit organizations or Area Agencies on Aging, through a single request for proposal process. The program objective is to develop and implement a Supplemental Security Income (SSI) Outreach program to the aged, blind or disabled. This program will identify, seek out, encourage and assist potentially eligible hard-to-reach, isolated or home bound persons to apply for SSI.

ELIGIBLE APPLICANTS

Incorporated not-for-profit organizations and Area Agencies on Aging, individually or as part of a consortium, may submit proposals. Any consortium applying must submit with the Request for Proposal, evidence from each participating organization/Area Agency that the terms, details of involvement, and financial arrangements have been worked out and are agreeable to consortium members.

COUNTIES MOST IN NEED OF SSI OUTREACH

In accordance with the Statute, in selecting those areas of the State which are most in need of outreach activities and therefore eligible for a grant, consideration was given to rural, suburban and urban areas. Other factors included:

- high percentages of individuals with incomes at or below the federal poverty level, including the elderly, disabled or visually impaired, and
- high percentages of minority individuals

Using the above criteria we have ranked the counties to determine which are most in need. The 1988 Rural, Suburban and Urban Classification of New York State Counties is based on the U.S. Bureau of Census Definitions of Metropolitian Statistical Areas (MSA*). Therefore in making the up to ten awards, the State Office for the Aging will only consider proposals that are written to conduct SSI outreach activities in the following

counties. A minimum of one award will be granted in each classification of counties.

URBAN		SUBURBAN	RURAL
Albany	Onondaga	Greene	Cattaraugus
Bronx	Queens	Nassau	Clinton
Chemung	Richmond	Orange	Franklin
Dutchess	Westchester	Rockland	St. Lawrence
Erie		Suffolk	Sullivan
Kings		Washington	Tompkins
Monroe			Ulster
New York			
Oneida			

Proposals can address outreach activities in one or more of the above counties. Proposals may also address outreach activities in a specific targeted area(s) within one or more of the above counties.

*Rural Counties, those outside the MSA; Urban Counties, those within an MSA and have a major central city and those counties which are part of NYC; and Suburban, those within an MSA and do not have a major central city.

TYPE AND AMOUNT OF AWARDS

$440,000 has been appropriated for direct awards. The average award will be $44,000. All awards will be made through a contract.

PROGRAM PERIOD

The program period will run up to 12 months from the effective date of the award provided there are SSI Outreach funds included in the State Office for the Aging State Fiscal Year 1990-91 State Budget (through appropriation or reappropriation). Unless such appropriation authority is provided in the State Fiscal Year 1990-91 State Budget, the State Office for the Aging will only reimburse for expenditures incurred through March 31, 1990.

ISSUING OFFICE

This abstract is issued by the SSI Outreach Program Unit, of the State Office for the Aging, Division of Finance and Administration, which shall be the sole contact for information relating to this grant process.

TENTATIVE TIME TABLE

September 29, 1989 - Release of Request for Proposal - ABSTRACT
October 13, 1989 - Request for copies of RFP should be received in the State Office for the Aging
October 20, 1989 - Release of Request for Proposal
November 27, 1989 - Proposals due at the State Office for the Aging by 4 PM
December 15, 1989 - Notification of Successful Applicants - Award process begins (See Program Period description on page 2)
March 31, 1990 - Interim Report due at the State Office for the Aging

A Final Report will be due to the State Office for the Aging 30 days following the end of the program period. Close-out vouchers will be due to the State Office for the Aging 60 days following the end of the program period.

PROGRAM OBJECTIVE

The program objective is to develop and implement a Supplemental Security Income (SSI) Outreach program which will identify, seek out, encourage and assist potentially eligible hard-to-reach, isolated or home bound persons to apply.

The program will be established to ensure maximum participation by eligible persons in the federal and State funded SSI program. It will be structured to increase participation within the State with particular attention to those areas of the State where enrollment rates are lowest and/or where there is a significant proportion of low income population. Outreach activities will include, but will not be limited to:

- identifying access barriers to enrollment in SSI
- identifying areas within communities where enrollment rates are lowest, and which individuals within those areas are not participating
- providing information to individuals about program eligibility and application procedures, and
- assisting in the actual application process.

FACTORS TO BE CONSIDERED IN SELECTION OF GRANTEES

Past Performance

- Other successful outreach efforts (Documented)
- Past performance on similar grants (Final reports should be submitted as evidence of success.)

- Preference will be given to those entities that have demonstrated a proven record of service to low income minorities

Coordination and Support

- Linkages with other organizations serving the aged, the blind, and/or the disabled
- Linkages with other organizations in the community
- Linkages with local Social Security offices (Letters should be submitted to indicate support from these and other sources.)

Innovation

- Unique approaches to developing an ongoing, community-wide outreach and assistance effort
- Ability to reach and involve non-English speaking individuals and groups

Quality of the proposal

- Cost effectiveness of the plan
- Staff of the agency - qualifications of management staff and proposed project staff
- Ability to continue the project with or without additional State funding

REPORTING REQUIREMENTS

An interim report is due to the Director of the State Office for the Aging by March 31, 1990 and a final report is due 30 days following the end of the program period showing:

A. A description of targeting and outreach activities implemented

B. Number of individuals (aged, disabled or blind) contacted through outreach, including the demographic data on American Indians/Alaskan Natives; Asian/Pacific Islanders, Blacks not of Hispanic Origin, and Hispanics

C. Number of individuals directly assisted to apply through outreach, including the demographic data mentioned above

D. Number of successful applicants (new enrollees) in each of the categories as a result of such assistance (including demographic data mentioned above.)